

Pryor Health Center



Executive Summary

Summarizes the Site, Parking, Facility Size, Staff and Contract Health Dollars necessary for the Service Delivery Plan in 2015. Identifies the Direct Care Services Offered to include highlighting any new services. Identifies the communities and population served for each service.

The second page of the Executive Summary documents the priority resource issues as identified through the Master Planning process.

Historical Utilization

Documents 3 years of RPMS and contract care workloads provided to the user population of the Service Delivery Area by product line and specialty.

Market Assessment

Compares the Historical Workload to the Health System Planning software and to national averages of patient care utilization, projecting future workloads based upon the worst case of these three planning scenarios. Also documents the percentage of care that will require contracting due to acuity and the quantity of care that can potentially be served by the direct care system.

Service Delivery Plan

Recommended service delivery plan by product line based upon projected workload, key characteristics, patient classification and tribal and IHS input.

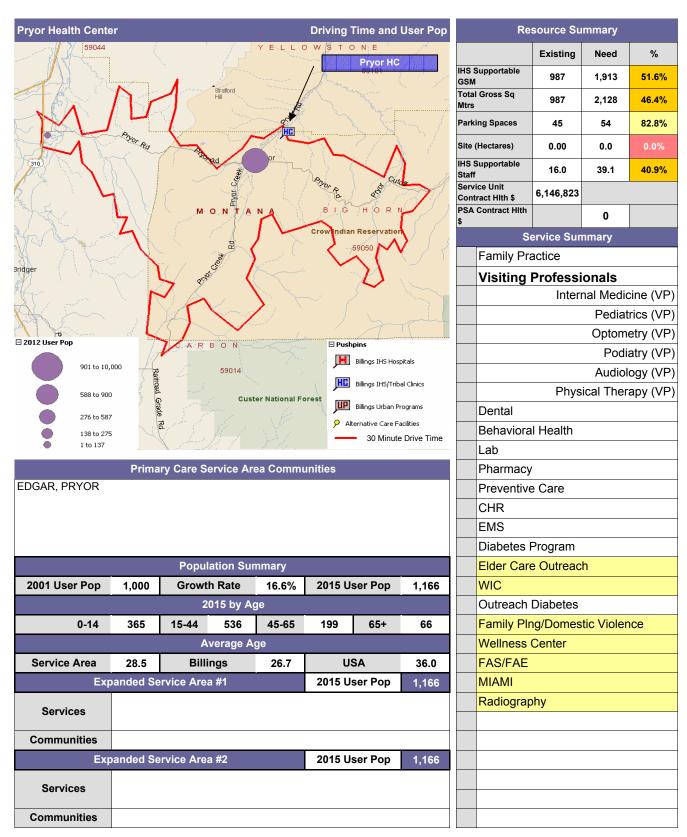
Resource Allocation

Quantifies the necessary space and key characteristics for the Service Delivery Plan and compares them against existing resources. Also tabulates necessary contract health dollars based on the delivery plan.

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Executive Summary





Executive Summary

| | Services & Resourcing Priorities |
|----|---|
| 1 | Secure X-Ray capabilities (either portable or an x-ray room) |
| 2 | Secure a dental hygienist |
| 3 | Secure a full time family practice doctor |
| 4 | Create and secure an administrative staff |
| 5 | Obtain physical therapy services once weekly |
| 6 | Secure a full time maintenance worker |
| 7 | Secure a better transportation service for clinic patients |
| 8 | Increase staff and space for behavioral health including psychiatrist services once monthly |
| 9 | Secure a full time public health nurse |
| 10 | Secure an EMS-ambulance service |
| 11 | |
| 12 | |
| 13 | |
| 14 | |
| 15 | |
| 16 | |
| 17 | |
| 18 | |



Executive Summary

| | Campus Infrastructure Priorities |
|----|--|
| 1 | Heating / air system – multiple problems (thermostat may be improperly placed, since hot and cool zones are appearing) |
| 2 | Water System – breakdown only hot water. Can't get hot water in bathrooms |
| 3 | Floor has problems with lifting linoleum tiles |
| | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| 11 | |
| 12 | |
| 13 | |
| 14 | |
| 15 | |

| | Functional Deficiencies |
|----|--|
| 1 | Helipad: not complete. Need walkway from clinic to pad. |
| 2 | Fencing: shutoffs not protected |
| 3 | No generator at clinic |
| 4 | No water sprinklers throughout the building |
| 5 | Heating / air system – multiple problems (thermostat may be improperly placed, since hot and cool zones are appearing) |
| 6 | Un-secure Utilities – anyone can walk up and affect switches |
| 7 | Medical Records – not enough room for records or office supplies |
| 8 | Lab Emergency Shower is located next to Lab Equipment (when used, everything near it gets wet). |
| 9 | |
| 10 | |
| 11 | |
| 12 | |
| 13 | |
| 14 | |
| 15 | |

Historical Workloads



Historical Workloads

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

| | D | irect or Trib | al Health Ca | re | | Соі | ntract Healt | h Care | | | | |
|---|-------|---------------|--------------|-----------|----------------------|-----------|---|-----------|--------------------|--|--|--|
| Discipline | 1999 | 2000 | 2001 | Average | 1999 | 2000 | 2001 | Average | % Contract Care | | | |
| | | Provider \ | /isits Only | | Provider Visits Only | | | | | | | |
| Primary Care | | | | | | | | | | | | |
| Family Practice | 3,511 | 3,782 | 3,537 | 3,610 | 0 | 0 | 0 | 0 | 0.0% | | | |
| Internal Medicine | 160 | 327 | 396 | 294 | 0 | 0 | 0 | 0 | 0.0% | | | |
| Pediatric | 290 | 190 | 218 | 233 | 0 | 0 | 0 | 0 | 0.0% | | | |
| Ob/Gyn | 200 | 124 | 135 | 153 | 3 | 1 | 1 | 2 | 1.1% | | | |
| Emergency Care | | | | | | | | | | | | |
| Emergency/Urgent | 354 | 261 | 253 | 289 | 0 | 0 | 0 | 0 | 0.0% | | | |
| ER/Non-urgent | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | | | |
| Specialty Care | | | | | | | | | | | | |
| Orthopedics | 12 | 29 | 36 | 26 | 14 | 6 | 24 | 15 | 36.4% | | | |
| Ophthalmology | 6 | 2 | 13 | 7 | 16 | 3 | 41 | 20 | 74.1% | | | |
| Dermatology | 15 | 14 | 10 | 13 | 0 | 0 | 2 | 1 | 4.9% | | | |
| General Surgery | 2 | 0 | 0 | 1 | 11 | 11 | 23 | 15 | 95.7% | | | |
| Otolaryngology | 7 | 12 | 10 | 10 | 7 | 6 | 13 | 9 | 47.3% | | | |
| Cardiology | 3 | 2 | 2 | 2 | 1 | 1 | 4 | 2 | 46.2% | | | |
| Urology | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | | | |
| Neurology | 0 | 0 | 0 | 0 | 2 | 0 | 4 | 2 | 100.0% | | | |
| Nephrology | 0 | 0 | 0 | 0 | 0 | 0 | 12 | 4 | 100.0% | | | |
| Allergy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | | | |
| Pulmonology | | | | ^ | ^ | | | ^ | 00/ | | | |
| Gerontology | _ | | | | | | | | _ | | | |
| Gastroenterology | No | Provide | r Codes | within RP | MS Syste | m for the | se types | of Specia | alist. | | | |
| Rheumatology | | | | | | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | о. орос. | | | | |
| Oncology | _ | | | | | | | | | | | |
| Pediatric-Genetics | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | | | |
| Traditional Healing | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | | | |
| Totals | 4,560 | 4,743 | 4,610 | 4,638 | 54 | 28 | 124 | 69 | 1.5% | | | |
| Direct & Tribal Care + Contract Care | 4,614 | 4,771 | 4,734 | 4,706 | | | | | | | | |

^{*} Provider Visits - Document visits to a Physician, Nurse Practitioner, Midwife, and or Physician Assistant.

| Other | Amhu | latory | Caro | Services |
|-------|-------------|--------|------|-----------|
| Other | AIIIDU | ιαιυιν | Care | Sel vices |

| Dental Service Minutes | 5,088 | 20,163 | 54,307 | 26,519 | 0 | 0 | 0 | 0 | 0.0% |
|---------------------------|-------|--------|--------|--------|----|----|----|----|-------|
| Optometry Visits | 196 | 235 | 212 | 214 | 18 | 35 | 13 | 22 | 9.3% |
| Podiatry Visits | 109 | 129 | 165 | 134 | 5 | 3 | 4 | 4 | 2.9% |
| Dialysis Patients | | | | 0 | 0 | 0 | 0 | 0 | 0% |
| Audiology Visits | 54 | 57 | 51 | 54 | 37 | 59 | 52 | 49 | 47.7% |
| Outpatient Behavioral | | | | | | | | | |
| Health | | | | | | | | | |
| Mental Health Visits | 84 | 128 | 70 | 94 | 8 | 11 | 3 | 7 | 7.2% |
| Psychiatry | 22 | 42 | 51 | 38 | 3 | 0 | 2 | 2 | 4.2% |
| Social Services Visits | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| Alcohol & Substance Abuse | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| Visits | | | | | | | | | |
| BH Visit Totals | 106 | 170 | 121 | 132 | 11 | 11 | 5 | 9 | 6.4% |

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Historical Workloads



Historical Workloads

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

| | | Direct or Trib | al Health Ca | ıre | | Соі | ntract Health | n Care | |
|-----------------------------|---------|----------------|--------------|---------|---------------|----------|---------------|----------|--------------------|
| Discipline | 1999 | 2000 | 2001 | Average | 1999 | 2000 | 2001 | Average | % Contract Care |
| Inpatient Care | | | | | | | | | |
| Labor & Delivery Births | 5 | 4 | 2 | 4 | 3 | 4 | 1 | 3 | 42.1% |
| Obstetrics Patient Days | 12 | 8 | 3 | 8 | 9 | 23 | 5 | 12 | 61.7% |
| Neonatology Patient Days | 17 | 7 | 2 | 9 | 5 | 1 | 3 | 3 | 25.7% |
| Pediatric Patient Days | 23 | 5 | 5 | 11 | 99 | 6 | 0 | 35 | 76.1% |
| Adult Medical Patient Days | | | | | | | | | |
| Cardiology | 6 | 7 | 2 | 5 | 10 | 2 | 35 | 16 | 75.8% |
| Endocrinology | 7 | 1 | 0 | 3 | 4 | 3 | 1 | 3 | 50.0% |
| Gastroenterology | 13 | 14 | 0 | 9 | 7 | 19 | 5 | 10 | 53.4% |
| General Medicine | 0 | 1 | 2 | 1 | 15 | 6 | 30 | 17 | 94.4% |
| Hematology | 0 | 0 | 1 | 0 | 0 | 0 | 2 | 1 | 66.7% |
| Nephrology | 11 | 7 | 0 | 6 | 7 | 6 | 18 | 10 | 63.3% |
| Neurology | 0 | 0 | 5 | 2 | 5 | 4 | 20 | 10 | 85.3% |
| Oncology | 0 | 0 | 0 | 0 | 0 | 0 | 11 | 4 | 100.0% |
| Pulmonary | 12 | 28 | 72 | 37 | 23 | 35 | 34 | 31 | 45.1% |
| Rheumatology | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0.0% 0% |
| Unknown | 0 49 | 0 58 | 0 83 | 0 63 | 0 71 | 0 75 | 0 156 | 0 101 | |
| Medical Patient Day Total | 49 | 58 | 83 | 63 | 7.1 | 75 | 150 | 101 | 61.4% |
| Adult Surgical Patient Days | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| Dentistry Dermatology | 2 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0.0% |
| General Surgery | 20 | 11 | 19 | 17 | 14 | 20 | 15 | 16 | 49.5% |
| Gynecology | 3 | 0 | 3 | 2 | 0 | 3 | 0 | 10 | 33.3% |
| Neurosurgery | 0 | 0 | 0 | 0 | 0 | 5 | 0 | 2 | 100.0% |
| Ophthalmology | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% |
| Orthopedics | 0 | 30 | 0 | 10 | 12 | 27 | 60 | 33 | 76.7% |
| Otolaryngology | 0 | 4 | 4 | 3 | 0 | 2 | 0 | 1 | 20.0% |
| Thoracic Surgery | 0 | 0 | 6 | 2 | 0 | 0 | 0 | 0 | 0.0% |
| Urology | 0 | 0 | 0 | 0 | 0 | 40 | 0 | 13 | 100.0% |
| Vascular Surgery | 7 | 0 | 0 | 2 | 33 | 0 | 0 | 11 | 82.5% |
| Surgical Patient Day Total | 32 | 46 | 32 | _ 37 | 59 | 97 | 75 | 77 | 67.7% |
| Psychiatry Patient Days | 0 | 0 | 0 | 0 | 48 | 9 | 33 | 30 | 100.0% |
| Medical Detox Patient Days | 2 | 0 | 0 | 1 | 19 | 1 | 0 | 7 | 90.9% |
| Sub Acute/Transitional Care | | | | 0 | 0 | 0 | 0 | 0 | 0% |
| Inpatient Care Totals | 135 | 124 | 125 | 128 | 310 | 212 | 272 | 265 | 67.4% |
| Direct & Tribal + Contract | | | | | | | | | |
| Care | 445 | 336 | 397 | 393 | No D | ata Sour | ce at this | time | |
| Substance Abuse Non- Acute | Caro | | | | $\overline{}$ | | | | |
| Capstance Abase Non-Acat | - Oure | | + | | | | | | |
| Adult Residential Treatment | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| Adol. Residential Treatment | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| SA Transisitional Care | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| Substance Abuse Totals | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| Elder Care | | | | | | | | | |
| Skilled Nursing Patients | | | | 0 | 0 | 0 | 0 | 0 | 0% |
| Assisted Living Patients | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |
| Hospice Patients | | | | 0 | 0 | 0 | 0 | 0 | 0% |
| Nursing Home Totals | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% |

Historical Workloads



Historical Workloads

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

| | D | irect or Trib | al Health Ca | re | Contract Health Care | | | | | |
|------------------------------------|--------|---------------|--------------|---------|----------------------|--------|--------|---------|--------------------|--|
| Discipline | 1999 | 2000 | 2001 | Average | 1999 | 2000 | 2001 | Average | % Contract Care | |
| Ancillary Services | | | | | | | | | | |
| Lab Billable Tests | 4,720 | 4,720 | 4,720 | 4,720 | 0 | 0 | 0 | 0 | 0.0% | |
| Pharmacy Scripts | 9,813 | 12,495 | 14,649 | 12,319 | 0 | 0 | 0 | 0 | 0.0% | |
| Acute Dialysis Procedures | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| Radiographic Exams | 0 | 0 | 0 | 0 | 201 | 347 | 222 | 257 | 100.0% | |
| Ultrasound Exams | | | | 0 | 0 | 0 | 0 | 0 | 0% | |
| Mammography Exams | | | | 0 | 0 | 0 | 0 | 0 | 0% | |
| Fluoroscopy Exams | | | | 0 | 0 | 0 | 0 | 0 | 0% | |
| CT Exams | | | | 0 | 0 | 0 | 0 | 0 | 0% | |
| MRI Exams | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| Nuclear Medicine Exams | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| Rad. Oncology Treatments | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| Chemotherapy Treatments | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| Physical Therapy Visits | 188 | 188 | 188 | 188 | 0 | 0 | 0 | 0 | 0.0% | |
| Occupational Therapy Visits | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| Speech Therapy Visits | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| Respiratory Therapy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| Cardiac Catherization | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| Home Health Care Patients | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| Minor Procedure Cases | | | | | | | | | | |
| Endoscopy | 1 | 2 | 1 | 1 | 0 | 0 | 0 | 0 | 0.0% | |
| Outpatient Surgery Cases | | _ | _ | | | | _ | _ | | |
| Cardiovascular | 0 | 2 | 0 | 1 | 0 | 0 | 0 | 0 | 0.0% | |
| Digestive | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% | |
| Endocrine | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| ENT | 0 | 3 | 2 | 2 | 0 | 0 | 0 | 0 | 0.0% | |
| Gynecology Hemic and Lymphatic | 0 0 | 0 0 | 2 | 1 | 0 | 0 | 0 | 0 | 0.0% | |
| Integument | 1 | 1 | 0 | 0 1 | 0 | 0 | 0 | 0 0 | 0% | |
| Musculoskeletal | 0 | 1 | 0 | - | 0 0 | 0 0 | 0 0 | - | 0.0% | |
| Nervous | 0 | 1 | 9 0 | 3 0 | 0 | 0 | 0 | 0 0 | 0.0% | |
| Ocular | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% | |
| Respiratory | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| Urogenital | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0% | |
| OP Surgical Case Total | 1 | 9 | 13 | 8 | 0 | 0 | 0 | 0 | 0% | |
| Inpatient Surgery Cases | 14 | 14 | 11 | 13 | 11 | 18 | 15 | 15 | 53.0% | |
| Surgical Case Total | 15 | 23 | 24 | 21 | 11 | 18 | 15 | 15 | 42% | |
| Surgical case rotal | 10 | 20 | 24 | 21 | | 10 | 10 | 10 | 72 /0 | |
| Direct & Tribal + Contract Care | 26 | 41 | 39 | 35 | | | | | | |
| | | | | | | | | | | |
| EMS - Pre-Hospital Resp. | 2 | 2 | 2 | 2 | 0 | 0 | 0 | 0 | 0.0% | |
| EMS - Inter Hospital Resp | | | | 0 | 0 | 0 | 0 | 0 | 0% | |

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Market Assessment



Market Assessment

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

| Year | | 2001 | | | 2015 | | 2015 PI | anning Ass | umption |
|--|----------------------|--------------------|------------------|------------------------|---------------------------|--------------|---------------|-------------------|------------------|
| HSP User Pop PSA | | 1,000 | | | 1,166 | | | rith Diabetes In | |
| Discipline | 3 Year History | USNA | HSP | 3 Year History | USNA | HSP | Total | Direct Care | Contract Care |
| | Pro | vider Visits On | nly | Pro | ovider Visits On | ly | P | rovider Visits O | nly |
| Primary care | | | | | | | | | |
| Family Practice | 3,610 | 1,083 | | 4209 | 1,263 | | 1,263 | 1,263 | 0 |
| Internal Medicine | 294 | 390 | | 343 | 455 | | 455 | 455 | 0 |
| Pediatric | 233 | 580 | | 271 | 676 | | 676 | 676 | 0 |
| Ob/Gyn | 155 | 403 | | 180 | 470 | | 470 | 470 | 0 |
| Primary Care Sub-Tot. | 4,292 | 2,456 | 3,414 | 5,004 | 2,864 | 3,983 | 5,004 | 5,004 | 0 |
| Emergency Care | | | | | | | | | |
| Emergency/Urgent | 289 | 225 | | 337 | 262 | | 337 | 337 | 0 |
| ER/Non-urgent | 0 | 150 | | 0 | 175 | | 175 | 175 | 0 |
| Emerg. Care Sub-Tot. | 289 | 375 | 429 | 337 | 437 | 502 | 502 | 502 | 0 |
| Specialty Care | | | | | | | | | |
| Orthopedics | 40 | 183 | | 47 | 213 | | 213 | 213 | 0 |
| Ophthalmology | 27 | 121 | | 31 | 141 | | 143 | 143 | 0 |
| Dermatology | 14 | 142 | | 16 | 165 | | 165 | 165 | 0 |
| General Surgery | 16 | 139 | | 18 | 162 | | 162 | 162 | 0 |
| Otolaryngology | 18 | 86 | | 21 | 100 | | 100 | 100 | 0 |
| Cardiology | 4 | 36 | | 5 | 42 | | 43 | 43 | 0 |
| Urology | 0 | 45 | | 0 | 52 | | 52 | 52 | 0 |
| Neurology | 2 | 38 | | 2 | 45 | | 45 | 45 | 0 |
| Other Specialties | | 300 | | 0 | 350 | | 350 | 350 | 0 |
| Nephrology | 4 | Unknown | | 5 | Unknown | | 5 | 5 | 0 |
| Allergy | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Pulmonology | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Gerontology | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Gastroenterology | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Rheumatology | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Oncology | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Pediatric-Genetics | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Traditional Healing | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Specialty Care Sub-Tot. | 125 | 1,090 | 168 | 146 | 1,272 | 196 | 1,279 | 1,279 | 0 |
| Total Provider Visits By PSA Residents | 4,706 | 3,921 | 4,011 | 5,488 | 4,574 | 4,681 | 6,785 | 6,785 | 0 |
| Provider Visits | Unmet need if (-) | huh | Over Utilization | on if (+) | | | | | |
| Total Provider Patient Utilization Rate | 4.71 | 3.92 | 4.01 | The rate is the User P | established by opulation. | dividing the | Total Provide | er Visits from th | e PSA by |
| Other Ambulatory Care | | | | | | | | | |
| Services | | | | | | | | | |
| Dental Service Minutes | 26,519 | 89,561 | 95,000 | 30,922 | 104,423 | 110,770 | 110,770 | 110,770 | 0 |
| Optometry Visits | 236 | Unknown | 321 | 276 | Unknown | 373 | 381 | 381 | 0 |
| Podiatry Visits | 138 | 173 | | 161 | 202 | | 211 | 211 | 0 |
| Dialysis Patients Audiology Visits | 0 103 | Unknown 156 | 109 | 0 120 | Unknown 183 | 128 | 0 183 | 0 183 | 0 0 |
| | | 130 | 109 | 120 | 103 | 120 | 103 | 100 | 0 |
| Outpatient Behavioral Health | | Unknows | 164 | 110 | Unknows | 100 | 100 | 100 | 0 |
| Mental Health Visits | 101 | Unknown | 164 | 118 | Unknown | 190 | 190 | 190 | 0 |
| Psychiatry | 40 | 101 | | 47 | 118 | | 118 | 118 | 0 |
| Social Services Visits Alcohol & Substance Abuse | 0 0 | Unknown Unknown | | 0 0 | Unknown Unknown | | 0 | 0 | 0 0 |
| BH Visits Totals | 141 | 101 | 164 | 165 | 118 | 190 | 308 | 308 | 0 |
| DIL AISIRS LOUGIS | 141 | 101 | 104 | 100 | 110 | 190 | 300 | 500 | U |

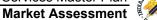




Market Assessment

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

| sources. | | 0004 | | | 0045 | | 0045 D | I | 4* | |
|--|-------------------|---------------|------------------|----------------------|---------|-----|----------------------|------------------|------------------|--|
| Year | | 2001 | | | 2015 | | | lanning Assı | - | |
| HSP User Pop PSA | | 1,000 | | | 1,166 | | Workload w | vith Diabetes In | npact | |
| Discipline | 3 Year History | USNA | HSP | 3 Year History | USNA | HSP | Total | Direct Care | Contract Care | |
| Innationt Cara | Prov | ider Visits O | nly | Provider Visits Only | | | Provider Visits Only | | | |
| Inpatient Care Labor & Delivery Births | 6 | 20 | 23 | 7 | 23 | 26 | 26 | 22 | 5 | |
| Obstetrics Patient Days | 20 | 40 | 48 | 23 | 47 | 56 | 56 | 46 | 10 | |
| Neonatology Patient Days | 12 | 60 | | 14 | 70 | | 70 | 43 | 27 | |
| Pediatric Patient Days | 46 | 30 | 58 | 54 | 35 | 67 | 67 | 42 | 25 | |
| Adult Medical Patient Days | | | | | | | | | | |
| Cardiology | 21 | 25 | | 24 | 30 | | 32 | 24 | 8 | |
| Endocrinology | 5 | 5 | | 6 | 5 | | 7 | 7 | 0 | |
| Gastroenterology | 19 | 16 | | 23 | 19 | | 23 | 23 | 0 | |
| General Medicine | 18 | 19 | | 21 | 23 | | 23 | 20 | 2 | |
| Hematology | 1 16 | 3 5 | | 1 19 | 3 5 | | 3 19 | 2 | 2 3 | |
| Nephrology Neurology | 11 | ວ 11 | | 13 | 5 12 | | 19 | 16 13 | 2 | |
| Oncology | 4 | 7 | | 4 | 8 | | 8 | 3 | 5 | |
| Pulmonary | 68 | 25 | | 79 | 29 | | 79 | 67 | 13 | |
| Rheumatology | 0 | 1 | | 0 | 1 | | 1 | 1 | 0 | |
| Unknown | 0 | 2 | | 0 | 2 | | 2 | 2 | 0 | |
| Medical Patient Day Total | 164 | 117 | 90 | 191 | 137 | 106 | 211 | 177 | 34 | |
| Adult Surgical Patient Days | | | | | | | | | | |
| Dentistry | 0 | 0 | | 0 | 0 | | 0 | 0 | 0 | |
| Dermatology | 1 | 1 | | 1 | 1 | | 1 | 1 | 0 | |
| General Surgery | 33 | 35 | | 38 | 41 | | 41 | 27 | 14 | |
| Gynecology | 3 | 8 | | 3 | 10 | | 10 | 8 | 1 | |
| Neurosurgery | 2 | 9 | | 2 | 10 | | 10 | 3 | 7 | |
| Ophthalmology Orthopedics | 0 43 | 0 21 | | 0 50 | 0 25 | | 0 50 | 0 42 | 0 8 | |
| Otolaryngology | 3 | 7 | | 4 | 9 | | 9 | 1 | 7 | |
| Thoracic Surgery | 2 | 13 | | 2 | 15 | | 15 | 1 | 14 | |
| Urology | 13 | 5 | | 16 | 6 | | 16 | 7 | 8 | |
| Vascular Surgery | 13 | 8 | | 16 | 10 | | 16 | 6 | 9 | |
| Surgical Patient Day Total | 114 | 108 | 62 | 133 | 126 | 70 | 167 | 98 | 69 | |
| Psychiatry Patient Days | 30 | 21 | 15 | 35 | 24 | 18 | 35 | 9 | 26 | |
| Medical Detox Patient Days | 7 | 3 | | 9 | 4 | | 9 | 6 | 3 | |
| Sub Acute/Transitional Care | 0 | 65 | | 0 | 76 | | 76 | 76 | 0 | |
| Inpatient Care Totals | 393 | 444 | 273 | 458 | 518 | 317 | 691 | 497 | 194 | |
| Inpatient Patient Days | Unmet need if (-) | -51 | Over Utilization | on if (+) | | | | | | |
| Substance Abuse Non-Acute | Care | | | | | | | | | |
| Adult Residential Treatment | 0 | 165 | | 0 | 193 | | 193 | 193 | 0 | |
| Adol. Residential Treatment | 0 | 48 | | 0 | 54 | | 54 | 54 | 0 | |
| SA Transitional Care | 0 | 7 | | 0 | 8 | | 8 | 8 | 0 | |
| Substance Abuse Total | 0 | 220 | 0 | 0 | 255 | 0 | 255 | 255 | 0 | |
| Elder Care | | | | | | | | | | |
| Skilled Nursing Patients | 0 | 1 | | 0 | 2 | | 2 | 2 | 0 | |
| Assisted Living Patients | 0 | 2 | | 0 | 2 | | 2 | 2 | 0 | |
| Hospice Patients | 0 | 0 | | 0 | 0 | | 0 | 0 | 0 | |
| Nursing Home Total | 0 | 3 | 0 | 0 | 4 | 0 | 4 | 4 | 0 | |

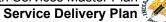




Market Assessment

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

| Year | | 2001 | | | 2015 | | 2015 Pla | anning Assı | umption |
|-------------------------------|-------------------|------------------|-----------|-------------------|---------------------|-----------|-------------------------------|------------------|------------------|
| HSP User Pop PSA | | 1,000 | | 1,166 | | | Workload with Diabetes Impact | | |
| Discipline | 3 Year History | USNA | HSP | 3 Year History | USNA | HSP | Total | Direct Care | Contract Care |
| | Pro | ovider Visits On | ly | Pro | ovider Visits On | ly | Pr | ovider Visits Or | nly |
| Ancillary Services | | | | | | | | | |
| Laboratory Services | | | | | | | | | |
| Clinical Lab Billable Tests | | 3,963 | 3,087 | | 4,627 | 3,603 | 4,627 | 4,258 | 272 |
| Microbiology Billable Tests | | 565 | 733 | | 660 | 856 | 856 | 503 | 335 |
| Blood Bank Billable Tests | | 99 | 59 | | 115 | 69 | 115 | 110 | 2 |
| Anatomical Pathology | | 8 | 20 | | 9 | 23 | 23 | 0 | 23 |
| Lab Billable Tests | 4,720 | 4,636 | 3,899 | 5,504 | 5,411 | 4,551 | 5,504 | 4,872 | 632 |
| Pharmacy Scripts | 12,319 | 9,803 | | 14,364 | 11,434 | | 14,364 | 14,364 | 0 |
| Acute Dialysis Procedures | 0 | 3 | 250 | 0 | 3 | 440 | 3 | 3 | 0 |
| Radiographic Exams | 257 0 | 327 | 359 50 | 299 | 382 | 419 58 | 419 | 419 | 0 |
| Ultrasound Exams | 0 | 65 | 121 | 0 | 76 | 142 | 76 | 76 | 0 0 |
| Mammography Exams | 0 | 127 16 | 25 | 0 | 148 19 | 29 | 148 29 | 148 29 | 0 |
| Fluoroscopy Exams CT Exams | 0 | 25 | 9 | 0 | 29 | 10 | 29 | 29 29 | 0 |
| MRI Exams | 0 | 17 | 9 | 0 | 29 | 10 | 29 | 29 | 0 |
| Nuclear Medicine Exams | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Rad. Oncology Treatments | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Chemotherapy Treatments | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Rehabilitation Services | Ū | Officiowii | | Ū | Officiowii | | Ū | Ü | U |
| Physical Therapy Visits | 188 | Unknown | | 219 | Unknown | | 219 | 219 | 0 |
| Occupational Therapy Visits | 0 | Unknown | | 0 | Unknown | | 0 | 0 | 0 |
| Speech Therapy Visits | 0 | Unknown | | Ö | Unknown | | 0 | 0 | 0 |
| Rehab Total Visits | 188 | - | 437 | 219 | - | 510 | 510 | 510 | 0 |
| Respiratory Therapy | | I Indian accus | 4.004 | 0 | United and a second | 4 707 | 4 707 | 4 707 | 0 |
| Workload Minutes | 0 | Unknown | 4,081 | 0 | Unknown | 4,767 | 4,767 | 4,767 | 0 |
| Cardiac Catherization Cases | 0 | 4 | | 0 | 7 | | 7 | 7 | 0 |
| Home Health Care Patients | 0 | 6 | | 0 | 7 | | 7 | 7 | 0 |
| Minor Procedure Cases | | | | | | | | | |
| Endoscopy | | 15 | | | 18 | | 18 | 18 | 0 |
| Outpatient Surgery Cases | | | | | | | | | |
| Cardiovascular | 1 | 1 | | 1 | 1 | | 1 | 1 | 0 |
| Digestive | 0 | 16 | | 0 | 19 | | 19 | 19 | 0 |
| Endocrine | 0 | 0 | | 0 | 0 | | 0 | 0 | 0 |
| ENT Gynecology | 2 1 | 8 | | 2 | 9 | | 9 | 9 | 0 |
| Hemic and Lymphatic | 0 | 6 0 | | 1 0 | 6 0 | | 6 0 | 6 0 | 0 0 |
| Integument | 1 | 6 | | 1 | 7 | | 7 | 7 | 0 |
| Musculoskeletal | 3 | 10 | | 4 | , 12 | | 12 | , 12 | 0 |
| Nervous | 0 | 3 | | 0 | 3 | | 3 | 3 | 0 |
| Ocular | 0 | 6 | | 0 | 7 | | 7 | 7 | 0 |
| Respiratory | 0 | 1 | | 0 | 1 | | 1 | 1 | 0 |
| Urogenital | 0 | 4 | | 0 | 5 | | 5 | 5 | 0 |
| OP Surgical Case Total | 8 | 60 | 30 | 9 | 70 | 35 | 70 | 70 | 0 |
| Inpatient Surgery Cases | 28 | 24 | 25 | 32 | 28 | 30 | 32 | 20 | 13 |
| Surgical Case Total | 35 | 84 | 55 | 41 | 98 | 65 | 102 | 90 | 13 |
| | _ | 404 | | ^ | 450 | | , | 450 | _ |
| EMS Responses | 2 | 131 | | 2 | 153 | | 153 | 153 | 0 |



Delivery Plan

| | | Projected Need | | | | Deliv | ery Options | s | |
|---|-------------------------|-------------------------|-----------------|----------------|------------------|--------------|------------------|---------------|-------------------|
| | Planned | | | | | Bellv | | ls due to | |
| | Direct | Key Characteristics | # Req'd | | PSA | | | shold | |
| Discipline | Care | (KC) | in 2015 | On Site | On Site VP | CHS* | Srv Unit | Region | Remarks |
| | | | | | | | | | |
| Primary Care | Migration % | | | | | | | | |
| (Provider Visits) | 27.0% | | | | | | | | |
| Primary Care Clinic examin | nes, diagnos | es, and treats ambulate | ory patients | giving continu | uity and coordir | ation to the | ir total healthc | are including | referral to other |
| health professionals and a | | • | | | - | | | | |
| assesses, provides, and evillnesses, maintenance car | | | | | | pnysicai, as | ssessment and | i treatment d | r common minor |
| Family Practice | 4,754 | Providers | 1.1 | 5,224 | ra todoriirig. | | | Includes (| DB/Gyn Workloa |
| Internal Medicine | 455 | Providers | 0.1 | 0,221 | 455 | | | | ported from Crov |
| Pediatric | 676 | Providers | 0.1 | - | 676 | | | | ported from Crov |
| Ob/Gyn | 470 | Providers | 0.2 | | | | | • | |
| Primary Care Total | 6,355 | Providers | 1.5 | 5,224 | 1,131 | 0 | 0 | | |
| | | | | - | | | | | |
| Emorgonov Coro | Migration % | | | | | | | | |
| Emergency Care | 0.00/ | | | | | | | | |
| The Francisco Medical C | 0.0% | | | | | | | -1 -1::4: | |
| The Emergency Medical C nature to patients who pres | | | | | | | | | |
| services and professional t | | | • | | | • | | rovides emine | our comountation |
| Emergency/Urgent | 337 | Patient Spaces | 0.2 | | <u> </u> | | | | |
| ER/Non-urgent | 175 | Providers | 0.0 | | | | | | |
| Emergency Care Total | 502 | Patient Spaces | 0.3 | | | | 502 | | 50% CHS @ SI |
| Emergency date rotal | 302 | Tationt opaces | 0.0 | | | | 302 | | 30 % 0110 @ 00 |
| | | | | | | | | | |
| Specialty Care | | | | | | | | | |
| Specialty Care examines, of | l diagnoses, ai | nd treats diseases and | l iniuries real | uirina special | ized capabilitie | s diagnosis | and procedure | es bevond th | e Primary Care |
| team. The service is typical | | | | | | | | · | Ť |
| Orthopedics | 213 | Providers | 0.1 | | | | 213 | Easte | rn Area Resource |
| Ophthalmology | 143 | Providers | 0.0 | | | | 143 | Are | a Wide Resource |
| Dermatology | 165 | Providers | 0.0 | | | | | | Telemedicin |
| General Surgery | 162 | Providers | 0.1 | | | | 162 | | rn Area Resourc |
| Otolaryngology | 100 | Providers | 0.0 | | | | 100 | Are | a Wide Resource |
| Cardiology | 43 | Providers | 0.0 | | | | 43 | | |
| Urology | 52 | Providers | 0.0 | | | | 52 | | |
| Neurology Other Subspecialties | 45 | Providers | 0.0 | - | | | 45 | | |
| Nephrology | 350 5 | Providers Providers | 0.1 | | | | 350 | | |
| | Unknown | Providers | 0.0 | | | | | Δre | a Wide Resource |
| Pulmonology | | | 0.0 | - | | | | 7110 | a wide resource |
| Gerontology | | | | | | | | Are | a Wide Resource |
| | | | 0.0 | - | | | | | |
| Gastroenterology | | | Linknown | | | | | | |
| Gastroenterology Rheumatology | Unknown | Providers | CHRITOWIT | | | | | | |
| Rheumatology Oncology | Unknown | Providers | 0.0 | | | | | | |
| Rheumatology Oncology Pediatric-Genetics | Unknown Unknown | Providers Providers | 0.0 Unknown | | | | | Are | a Wide Resource |
| Rheumatology Oncology Pediatric-Genetics Traditional Healing | Unknown | Providers | 0.0 | 0 | | | | Are | a Wide Resource |
| Rheumatology Oncology Pediatric-Genetics Traditional Healing Specialty Care Sub- | Unknown Unknown | Providers Providers | 0.0 Unknown | 0 | 0 | 0 | 1,110 | Are | a Wide Resourc |
| Rheumatology Oncology Pediatric-Genetics Traditional Healing | Unknown Unknown 0 | Providers Providers | 0.0 Unknown | | 0 | 0 | 1,110 | Are | a Wide Resource |
| Rheumatology Oncology Pediatric-Genetics Traditional Healing Specialty Care Sub- | Unknown Unknown 0 | Providers Providers | 0.0 Unknown | | 0 | 0 | 1,110 | Are | a Wide Resource |
| Rheumatology Oncology Pediatric-Genetics Traditional Healing Specialty Care Sub- Total | Unknown Unknown 0 | Providers Providers | 0.0 Unknown | | 0 | 0 | 1,110 | Are | a Wide Resource |
| Rheumatology Oncology Pediatric-Genetics Traditional Healing Specialty Care Sub- Total Other Ambulatory | Unknown Unknown 0 | Providers Providers | 0.0 Unknown | | 0 | 0 | 1,110 | | a Wide Resource |

Supported by Crow

Supported by Crow

vision; and refers patients to physicians for diagnosis and treatment of suspected disease.

Optometrist

Podiatrists

0.2

0.1

The Optometry Clinic examines the eyes, cheeks, and adnexa including refraction and other procedures, prescribes lenses to correct refractive error and improve

381

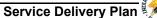
211

381

211

Optometry Visits

Podiatry Visits



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

| | | Projected Need | | | | Delive | ry Option | S | |
|------------|-------------------|---------------------|---------|---------|------------|--------|-----------|--------------------|---------|
| | Planned Direct | Key Characteristics | # Req'd | | PSA | | | ls due to shold | |
| Discipline | Care | (KC) | in 2015 | On Site | On Site VP | CHS* | Srv Unit | Region | Remarks |

Podiatry examines, diagnoses, and treats patients with disorders, diseases, and injuries to the foot or adjunctive tissue; provides follow-up care for selected postoperative ambulatory patients; provides a comprehensive plan of care for patients, including monitoring and maintaining their state of health, counseling and guidance, health eduation, rehabilitation, and prevention of disease; and provides clinical and consultation services, medical care evaluation, professional training of assigned personnel, preparation and submission of reports, and maintenance of medical records.

Dialysis Patients 0 Dialysis Stations 0.0 45 Hours Per Week

Dialysis provides the purification of the patient's blood through use of an artificial kidney machine or similar device. Specially trained personnel operate, maintain, and monitor the hemodialysis equipment and other specialized support equipment for patients who are undergoing hemodialysis treatment in the unit.

0.1 183 Audiologists Supported by Crow

The Audiology Clinic provides comprehensive audiologic support for patients for the determination of etiology, pathology, and magnitude of hearing loss and potential for remediation and rehabilitation; assists in the evaluation of auditory and vestibular systems. Specific services include pure tone threshold audiometry; basic and advanced clinical testing; pediatric evaluations; neonatal hearing testing as part of the early hearing loss identification program; hearing aid evaluation, fittings, and repairs; ear mold fittings; vestibular evaluations, dispensing of hearing protection devices (fitting, education, and motivation); determination of proper referral and disposition.

Behavioral Health

Behavioral Health provides psychiatric, psychological, psychosocial, substance abuse, and socioeconomic evaluation and consultation; individual and group services, patient care, information, referral, and follow-up services to facilitate medical diagnosis, care, treatment; and proper disposition of patients (inpatient and outpatient) referred to the Social Work Clinic, which includes self-referred patients and those seen automatically on the basis of diagnosis (for example, suspected child abuse or attempted suicide). It provides a comprehensive plan of service to patients and their families including counseling and guidance, therapy, information and referral, and discharge planning; provides clinical and consultative services to patients and families, social service delivery evaluation; professional training of assigned and contractually affiliated personnel; prepares and submits reports; maintains medical and social service records.

| Mental Health Visits | 190 | Counselors | 1.0 | 1 | |
|-------------------------------------|-----|------------|-----|-----|-------------------|
| Psychiatry Provider | 118 | Providers | 0.1 | 0.1 | Supported by Crow |
| Social Service Visits | 0 | Counselors | 0.0 | 0.0 | Supported by Crow |
| Alcohol & Substance Abuse Visits | 0 | Counselors | 0.4 | 1.0 | Override |
| Behavioral Health Totals | 308 | Counselors | 1.4 | 2 | |

| Inpatient Care | | | | |
|-------------------------|----|-----------|-----|----|
| Labor & Delivery | 22 | LDRs | 0.4 | 22 |
| Obstetrics Patient Days | 46 | # of Beds | 0.7 | 46 |

Obstetrics provides for specialized care, treatment, and consultative evaluation to eligible inpatients; provides antepartum, delivery, and postpartum care to maternity patients; and has responsibility for the operation and maintenance of the labor and delivery suite. The labor and delivery suite provides labor and delivery care by specially trained personnel to eligible patients, including prenatal care during labor, assistance during delivery, post-natal care, and minor gynecological surgery, if it is performed in the suite. Additional activities may include preparing sterile set-ups for deliveries; preparing patients for transportation to the delivery suite and the post-anesthesia.

Neonatology Patient 43 # of Bassinets 0.7 43 Davs

The Newborn Nursery provides specialized inpatient care, treatment, and consultative evaluation of newborn infants; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of the newborn, including those born prematurely; and provides for, or otherwise ensures, appropriate diagnostic evaluation and care of all inpatient in the neonatal age group; prepares medical records; and submits required reports.

Pediatric Patient Days # of Beds

Pediatric Care provides specialized inpatient care, treatment, and consultative evaluation of infa other professional services; coordinates healthcare delivery relative to the examination, diagnos medical records; and submits required reports.

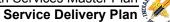
Pryor faces raised acuity level issues due to distance from Crow on a few service lines.

Adult Medical Acute Care

studies, and therapies.

Medical Care provides inpatient care and consultative evaluation in the medical specialties and subspecialties described in this section; coordinates healthcare delivery relative to the examination, diagnosis, treatment and proper disposition of eligible patiel Pryor faces raised acuity level issues due to distance records; and submits required reports. The organization of the medical care function will vary a from Crow on a few service lines. subspecialty services are established, they shall provide the related specialized techniques and

Cardiology # of Beds 02 24 Endocrinology 7 # of Beds 0.1 7



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

| | | Projected Need | | | | Deliv | ery Options | ; | |
|--|--|---|---|--|---|---|---|--|---|
| | Planned Direct | Key Characteristics | # Req'd | | PSA | | Referral Thres | | |
| Discipline | Care | (KC) | in 2015 | On Site | On Site VP | CHS* | Srv Unit | Region | Remarks |
| Gastroenterology | 23 | # of Beds | 0.2 | - | | | 23 | | |
| General Medicine | 20 | # of Beds | 0.2 | | | | 20 | | |
| Hematology | 2 | # of Beds | 0.0 | | | | 20 | | |
| Nephrology | 16 | # of Beds | 0.1 | | | | 16 | | |
| Neurology | 13 | # of Beds | 0.1 | - | | | 13 | | |
| Oncology | 3 | # of Beds | 0.0 | - | | | 3 | | |
| Pulmonary | 67 | # of Beds | 0.6 | | | | 67 | | |
| Rheumatology | 1 | # of Beds | 0.0 | | | | 1 | | |
| Unknown | 2 | # of Beds | 0.0 | | | | 2 | | |
| edical Patient Day | | # OI DCu3 | | | | | | | |
| otal | 177 | | 1.5 | 0 | | 0 | 177 | 0 | |
| dult Surgical Acute Ca urgical Care provides inpa | | | | | | | | | |
| ealthcare delivery relative repares medical records; a /hen subspecialty services rocedures, studies, and the | and submits are establi | required reports. The | organizatio | n of the surgi | cal care function | varies acco | ording to patie | nt load, staffi | ing, and facilities. |
| Dentistry | 0 | # of Beds | 0.0 | | | | 0 | | |
| Dermatology | 1 | # of Beds | 0.0 | | | | 1 | | |
| General Surgery | 27 | # of Beds | 0.3 | | | | 27 | | |
| Gynecology | 8 | # of Beds | 0.1 | | | | 8 | | |
| Neurosurgery | 3 | # of Beds | 0.0 | | | | 3 | | CHS @ S |
| Ophthalmology | 0 | # of Beds | 0.0 | | | | 0 | | |
| Orthopedics | 42 | # of Beds | 0.4 | | | | 42 | | |
| Otolaryngology | 1 | # of Beds | 0.0 | | | | 1 | | |
| Thoracic Surgery | 1 | # of Beds | 0.0 | | | | 1 | | CHS @ SI |
| Urology | 7 | # of Beds | 0.1 | | | | 7 | | |
| Vascular Surgery | 6 | # of Beds | 0.1 | | | | 6 | | |
| urgical Patient Day otal | 98 | # of Beds | 1.0 | 0 | | 0 | 98 | 0 | |
| tensive Care Unit | 55 | # of beds | 0.2 | | | 0 | 55 | Easter | n Area Resourc |
| tensive Care Units (ICUs) reatening conditions. The | | · | | | | | | | |
| sychiatry Patient | 9 | # of Beds | 0.0 | | | | 9 | | CHS @ SI |
| sychiatric Care provides s iagnosis, treatment, and pi sychiatric disorders when i rovides short-term treatme cords and corresponden | roper dispo required to nt to patien ce that evol | sition of patients with pa prevent injury to thems ts psychologically or ph ve during treatment of p | sychotic, ne elves or to o nysically dep patients; pre | urotic, or oth others; establ pendent upor | er mental disorde ishes therapeution alcohol or drugs | ers; maintai ; regimens; s; maintains | ns protective of conducts indictions coustody of se sired reports. | custody of pa vidual or gro ensitive or me | atients with up therapy session edically privileged |
| Medical Detox Patient | 6 | # of Beds | 0.0 | | | | 6 | Easter | n Area Resourc |
| ubstance Abuse Care proviagnosis, treatment, and pithen required to prevent injensitive or medically privile | roper dispo iury to them | sition of patients psycho selves or to others; est | ologically or tablishes the | physically de erapeutic reg | ependent upon a imens; conducts | lcohol or dr individual o | ugs; maintains r group therap | s protective on oy sessions; | custody of patients maintains custody |
| ransitional Care | 76 | # of Beds | 0.3 | | | | 76 | | CHS @ S |
| ransitional Care provides c cute care, provides specifi | | • | | | | eir discharg | ge from acute | care. Staffin | ng, while less than |
| patient Care Totals | 552 | # of Beds | 5 | 0 | | 0 | 552 | 0 | |
| ubstance Abuse on-Acute Care | to Coro 4t- | a treatment of substance | oo ahuaa dii | porders in a | age and accurate | sneoific a- | tting | | |
| ubstance Abuse Non-Acut | e Care - the | e treatment of substant | e apuse dis | soraers in an | age and security | specific se | uing. | | |
| dult Residential | 193 | # of Beds | 0.7 | | | | | 193 | Eastern Are |
| | | | | | | | | - | |

Treatment

Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

| | | Projected Need | | | | Deliv | ery Option | s | |
|---|-------------------|----------------------------|--------------|----------------|------------------|----------------------|------------------------------|-------------------------------|------------------------|
| | Planned Direct | Key Characteristics | # Req'd | | PSA | | Referra | ls due to shold | |
| Discipline | Care | (KC) | in 2015 | On Site | On Site VP | CHS* | Srv Unit | Region | Remarks |
| Adolescent Residential Freatment | 54 | # of Beds | 0.2 | | | | | 54 | Eastern Are |
| Substance Abuse Transitional Care | 8 | # of Beds | 1.4 | | | | 8 | | |
| Substance Abuse Non- Acute Care Totals | 255 | | 2.3 | 0 | | 0 | 8 | 246 | |
| Elder Care | | | | | | | | | |
| Elderly Care Program provi | ides physica | al, psychological, social, | and spiritu | al care for he | althy and dying | seniors in a | n environmen | t outside of a | hospital. |
| Nursing Home | 2 | # of Beds | 2.0 | | | | 2 | | |
| Assisted Living / | 2 | # of Beds | 2.0 | - | | | 2 | | |
| Hospice | 0 | # of Beds | 0.0 | | | | 0 | | |
| Elder Care Totals | 4 | | 4.0 | 0 | | 0 | 4 | 0 | |
| Ancillary Services Laboratory Services | | | | | | | | | |
| Clinical Pathology operates systems. Additional activiti samples for testing. The Cli | es may incl | ude, but are not limited | to, transpor | tation of spec | imens from the | nursing floo | rs and surgic | _ | |
| Clinical Lab | 4,258 | Fech Staff @ Peak | 0.4 | 4,258 | | | | | |
| Microbiology | 503 | ech Staff @ Peak | 0.1 | | | | 503 | | |
| Blood Bank | 110 | ech Staff @ Peak | 0.0 | | | | 110 | | |
| Anatomical Pathology | 0 | ech Staff @ Peak | 0.0 | | | 0 | | | |
| Anatomical Pathology cond | | | | | | | | ns including d | iagnostic and |
| outine procedures; provide | | | | ortem examii | nations; and ope | erates the m | orgue. | | |
| Lab Totals | 4,872 | Fech Staff @ Peak | 0.5 | 44.004 | | | | | |
| Pharmacy | 14,364 3 | Pharmacists | 0.7 | 14,364 | | 3 | | | |
| Acute Dialysis Acute Dialysis provides pur | | Rooms | | 's own perito | neal membrane | | the abdomen | as the filter to | remove evees |
| water and toxins, while the perform these same function | patient is h | ospitalized. Specialty tra | | | | | | | |
| Diagnostic Imaging | | | | | | | | | |
| Diagnostic Radiology provio interpreting, storing, and re | | | | | | faces rais from (| ed acuity le Crow on a fe | vel issues d ew service li | ue to distance nes. |
| Radiographic | 419 | Rooms | 0.1 | 419 | | De | sire on-site, | | ıs Case Analy |
| Ultrasound | 76 | Rooms | 0.0 | | | | 76 | | 20% CHS @ \$ |
| Mammography | 148 | Rooms | 0.0 | | | | 148 | | 20% CHS @ 3 |
| Fluoroscopy | 29 | Rooms | 0.0 | | | - | 29 | | 20% CHS @ |
| | 29 | Rooms | 0.0 | | - | | 29 | | CHS @ |
| СТ | | _ | 0.0 | | | | 20 | | |
| MRI | 20 | Rooms | 0.0 | | | | 20 | | CHS @ |
| | 20 721 | Rooms | 0.0 | 419 | | | 20 | Easter | CHS @ : |
| MRI Diagnostic Imaging | | | | 419 | | 0 | 20 | Easter | |

performing clinical investigative studies, providing whole blood counting, evaluating patients suspected of being contaminated with gamma-emitting radio

0

0

nuclides, consulting with patients and attending physicians, and maintaining radioactive waste disposal and storage of radioactive materials.

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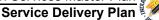
Rooms

Patient Spaces

THE INNOVA GROUP

Rad. Oncology

Chemotherapy

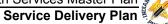


Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

| | | Projected Need | | | | Delive | ery Options | |
|--|-------------------|---------------------------------------|----------------|------------------|------------------|-----------------|-------------------------------|---------------------------------------|
| | Planned Direct | Key Characteristics | # Req'd | | PSA | | Referrals due to Threshold | |
| Discipline | Care | (KC) | in 2015 | On Site | On Site VP | CHS* | Srv Unit Region | Remarks |
| Rehabilitation Services Rehabilitation Services dev | relops, coor | | al knowledg | ge and skills in | n planning, orga | nizing, and I | | |
| and outpatients whose abili | • | • | - | | • | | • | · · · · · · · · · · · · · · · · · · · |
| consultation, counseling, te Occupational Therapy, and | Speech Th | erapy. | | nity services. | This service typ | ically consis | ts of three disciplines: Ph | nysical Therapy, |
| Physical Therapy | 219 | Therapy FTE | 0.1 | . <u> </u> | | V | | |
| Occupational Therapy | 0 | Therapy FTE | 0.0 | - | | X | | |
| Speech Therapy | 510 | Therapy FTE Therapy FTE | 0.0 | | 510 | | From Cro | w, work with Aide |
| Rehab Total Respiratory Therapy | 4,767 | Therapy FTE | 0.3 | | 510 | | 4.767 | w, work with Aide |
| Respiratory Therapy provide | | | | rosol and cer | tain potent drug | s through in | | ure and provides |
| other forms of rehabilitative | | | | | | | | |
| analysis. The service also | tests and e | valuates the patient's al | oility to exch | nange oxygen | and other gase | s through m | easurement of inhaled an | d exhaled gases and |
| analysis of blood. | | | | | | | | |
| Cardiac Catherization | 7 | Rooms | 0.0 | | | | 7 | CHS @ SU |
| The Cardiac Catheterization | | | | | | | · · | |
| heart and circulatory system techniques; retrieving and a | | · | | | | | | and otner |
| | 7 | # FTE | 0.5 | Salibrating, an | u mamaming sp | reciai equipi | 7 | |
| Home Health Care | | | | f racidonas to | nvomoto moint | ain ar raata | <u> </u> | the level of |
| Home Health Care is provide independence while minimi | | | • | | • | airi, or resto | re nealth of to maximize t | rie ievei oi |
| <u> </u> | Zing the end | sets of disability and lim | ess, iriciaali | ng terminar iii | 1633. | | | |
| Surgery The Surgery product line in | aludaa Ana | othopiology Pro 9 Poot | Populary | and the provis | nion of invocino | nragaduras | roquiring the sterility of or | Operating Boom or |
| Minor Procedure Room. | ciudes Arie. | siliesiology, Fie & Fosi | Recovery, a | and the provis | SION OF INVASIVE | orocedures i | requiring the sterility of ar | Operating Room of |
| Minor Procedure | | | | | | | | |
| Endoscopy | 18 | Endoscopy Suites | 0.0 | | | | 18 | |
| Outpatient Surgery Cas | | O. t ti t OD- | 0.0 | · - | | | | 0110 @ 011 |
| Cardiovascular | 1 | Outpatient ORs | 0.0 | - | | | 1 | CHS @ SU |
| Digestive | 19 0 | Outpatient ORs Outpatient ORs | 0.0 | | | | 19 0 | |
| Endocrine ENT | 9 | Outpatient ORs | 0.0 | · - | | | 9 | |
| Gynecology | 6 | Outpatient ORs | 0.0 | · | | | 6 | |
| Hemic and Lymphatic | 0 | Outpatient ORs | 0.0 | | | | 0 | |
| Integument | 7 | Outpatient ORs | 0.0 | | | | 7 | |
| Musculoskeletal | 12 | Outpatient ORs | 0.0 | · - | | | 12 | |
| Nervous | 3 | Outpatient ORs | 0.0 | · | | | 3 | CHS @ SU |
| Ocular | 7 | Outpatient ORs | 0.0 | - | | | 7 | |
| Respiratory | 1 | Outpatient ORs | 0.0 | - | | | 1 | |
| Urogenital | 5 | Outpatient ORs | 0.0 | - | | | 5 | CHS @ SU |
| OP Surgical Case | 70 | Outpatient ORs | 0.0 | 0 | 0 | 0 | 70 | _ |
| Inpatient Surgery | 20 | Inpatient ORs | 0.0 | | | | 20 | |
| Surgical Case Total | 90 | | 0.0 | 0 | 0 | 0 | 107 | |
| Administrative Support | | | | | | | | |
| | | # of CTC | G F | - F F | | | | Cun @ Cu |
| Administration Administration organizes, a | dministors | # of FTE | 6.5 | 5.5 | io concete of th | o fooility: ros | enoncible for all norsenne | Sup @ Su |
| attached to the facility; dete | | · · · · · · · · · · · · · · · · · · · | | | • | • | • | |
| is responsible for the care, | | | | | , 5 | .pport otarr, | and racing of improvincing | an cotton programe, |
| Information Manageme | | # of FTE | 1.3 | | | | 0.3 | Sup @ Su |
| Information Management D | | | | aging the day | to day operation | , training, m | | |
| computerization hardware, | | | | | | | | |
| Health Information Man | agement | # of FTE | 4.2 | 3.2 | | | | Sup @ Su |
| Health Information Manage | ment is res | | | completing, a | analyzing, ensui | ing availabil | lity, and safekeeping of pa | |
| called charts) in order to fa | cilitate, eval | uate, and improve patie | ent care. | | | | | |
| Business Office | | # of FTE | 4.0 | 3.0 | | | | Sup @ Su |
| Business Office implement | | | | | | | | |
| other health insurance; revi | | ects of accounts receive | | | | rty payer re | quirements; submits all cl | aims to third-party |

payers; follows up to ensure that collections are made; and documents and reports collection activities.



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

| | | Projected Need | | | | Deliv | ery Options | \$ | |
|--|---|--|--|---|---|--|--|--|---|
| | Planned Direct | Key Characteristics | # Req'd | | PSA | | Referral Thres | s due to shold | |
| Discipline | Care | (KC) | in 2015 | On Site | On Site VP | CHS* | Srv Unit | Region | Remarks |
| Contract Health | | # of FTE | 1.1 | | | | 1.1 | | Sup @ S |
| Contract Health Service P | rogram coord | | | is not availa | ble at the facility. | This is do | | ning eligibilit | |
| Care, identifying other alte staff. | ernate resour | ces, establishing medic | al priorities | and having a | n effective worki | ng relations | hip with all pr | ivate provide | ers, patients, and |
| Facility Support Services | | | | | | | | | |
| Clinical Engineering | | # of FTE | 0.6 | 0.6 | | | | | |
| Clinical Engineering provion determine operational state equipment; repairs or repliand and tests contractor-instal | tus, and assig | gns serviceability condi broken parts; rebuilds | tion codes to and fabricat | o equipment; tes equipmen | performs schedu t or components | uled preven ; modifies e | tive maintena quipment and | nce of medio | cal and dental equipment; inspec |
| Facility Management | | # of FTE | 2.1 | 1.1 | | | | | Sup @ S |
| The maintenance of a hea | lth sites facili | | | | | | | | |
| Central Sterile | | # of FTE | 0.7 | 0.7 | | | | | |
| The decontamination, ass | embly, steriliz | | | | on. Also respons | ible for the | distribution of | other sterile | products. |
| Dietary | | # of FTE | 0.0 | 0 | | | | | |
| The ordering, maintenance | e, preparatio | | | | outpatients and | staff. Nutri | tional oversigl | ht for these r | neals as well as |
| nutritional consultations w | ith patients a | nd staff. | | | | | | | |
| Property & Supply Property & Supply provide | | # of FTE | 0.5 | 0.0 | | | | | Sup @ S |
| procurement, inventory co and non-medical supplies of medical organization in- | and equipme | ent required in support | of the medic | al mission; in | stallation manag | ement of th | ne medical sto | ck fund; mai | nagement and cont |
| and non-medical supplies of medical organization in- managing the installation i Housekeeping & Linen The Housekeeping Servic | and equipme -use property medical war i l e provides re | ent required in support of through authorization, readiness materiel prog # of FTE sponsibility for maintain | of the medic property ac tram. 3.1 ning the inte | eal mission; in counting, rep 2.1 rior of a facili | stallation managorting and budge | nement of the | ne medical sto dures; and pla anliness and s | ck fund; mai nning, pre-p sanitation ac | nagement and cont ositioning, and Sup @ S hievable. |
| and non-medical supplies of medical organization in- managing the installation i Housekeeping & Linen | and equipme -use property medical war i l e provides re | ent required in support of through authorization, readiness materiel prog # of FTE sponsibility for maintain | of the medic property ac tram. 3.1 ning the inte | eal mission; in counting, rep 2.1 rior of a facili | stallation managorting and budge | nement of the | ne medical sto dures; and pla anliness and s | ck fund; mai nning, pre-p sanitation ac | nagement and cont ositioning, and Sup @ S hievable. |
| and non-medical supplies of medical organization in- managing the installation i Housekeeping & Linen The Housekeeping Servic Housekeeping, also, is res | and equipme -use property medical war i l e provides re | ent required in support of through authorization, readiness materiel prog # of FTE sponsibility for maintain | of the medic property ac tram. 3.1 ning the inte | eal mission; in counting, rep 2.1 rior of a facili | stallation managorting and budge | nement of the | ne medical sto dures; and pla anliness and s | ck fund; mai nning, pre-p sanitation ac | nagement and cont ositioning, and Sup @ S hievable. |
| and non-medical supplies of medical organization in-managing the installation in Housekeeping & Linen The Housekeeping Service Housekeeping, also, is respecial linens. Preventive Care Health Promotion / | and equipme -use property medical war i l e provides re | ent required in support of through authorization, readiness materiel prog # of FTE sponsibility for maintain | of the medic property ac tram. 3.1 ning the inte | eal mission; in counting, rep 2.1 rior of a facili | stallation managorting and budge | nement of the | ne medical sto dures; and pla anliness and s | ck fund; mai nning, pre-p sanitation ac | nagement and contoositioning, and Sup @ Shievable. |
| and non-medical supplies of medical organization in-managing the installation in Housekeeping & Linen The Housekeeping Service Housekeeping, also, is respecial linens. Preventive Care Health Promotion / Disease Prevention | and equipme -use property medical war i l e provides re | ent required in support of through authorization, readiness materiel prog # of FTE sponsibility for maintain | of the medic property ac tram. 3.1 ning the inte | eal mission; in counting, rep 2.1 rior of a facili | stallation managorting and budge | nement of the | ne medical sto dures; and pla anliness and s | ck fund; mai nning, pre-p sanitation ac | nagement and conto ositioning, and Sup @ S hievable. |
| and non-medical supplies of medical organization in-managing the installation in Housekeeping & Linen The Housekeeping Service Housekeeping, also, is respecial linens. Preventive Care Health Promotion / Disease Prevention (Preventive Care) | and equipme-use property medical war i leeprovides re sponsible for | ent required in support of through authorization, readiness materiel prog # of FTE sponsibility for maintain picking up, sorting, issu | of the medic property ac rram. 3.1 ning the inte uing, distribu | eal mission; ir. counting, rep 2.1 rior of a facili uting, mendin | stallation manage orting and budge ty at the highest g, washing, and | lement of the stary processing | ne medical sto dures; and pla anliness and s in-service line | ck fund; mai nning, pre-p sanitation aci | nagement and concositioning, and Sup @ S hievable. uniforms and |
| and non-medical supplies of medical organization in- managing the installation in- Housekeeping & Linen The Housekeeping Service Housekeeping, also, is resisted linens. Preventive Care Health Promotion / Disease Prevention (Preventive Care) The oversight of all preven | and equipme- use property medical war i e provides re sponsible for | ent required in support of through authorization, readiness materiel program of FTE sponsibility for maintain picking up, sorting, issued the alth education program of the alth education | of the medic property ac ram. 3.1 ning the inte uing, distribu | al mission; incounting, rep 2.1 rior of a facility mending the facility. | stallation manage orting and budge ty at the highest g, washing, and | level of clear | ne medical sto dures; and pla anliness and s in-service line | ck fund; mainning, pre-p sanitation aciens including | nagement and conto ositioning, and Sup @ S hievable. uniforms and |
| and non-medical supplies of medical organization in-managing the installation in Housekeeping & Linen The Housekeeping Service Housekeeping, also, is respecial linens. Preventive Care Health Promotion / Disease Prevention (Preventive Care) The oversight of all preventataff. These departments | and equipme- use property medical war i e provides re sponsible for | ent required in support of through authorization, readiness materiel program of FTE sponsibility for maintain picking up, sorting, issued the alth education program of the alth education | of the medic property ac ram. 3.1 ning the inte uing, distribu | al mission; incounting, rep 2.1 rior of a facility mending the facility. | stallation manage orting and budge ty at the highest g, washing, and | level of clear | ne medical sto dures; and pla anliness and s in-service line | ck fund; mainning, pre-p sanitation aciens including | nagement and concositioning, and Sup @ S hievable. uniforms and |
| and non-medical supplies of medical organization in-managing the installation in Housekeeping & Linen The Housekeeping Service Housekeeping, also, is respecial linens. Preventive Care Health Promotion / Disease Prevention (Preventive Care) The oversight of all preventataff. These departments | and equipme- use property medical war I e provides re sponsible for ntive care and provide lead | ent required in support of through authorization, readiness materiel programmer of FTE sponsibility for maintain picking up, sorting, issued the authorization programmer of the authorization | of the medic property ac tram. 3.1 ning the inte uing, distribution arams within e facility in t | al mission; incounting, rep 2.1 rior of a facility mending the facility. | stallation manage orting and budge ty at the highest g, washing, and | level of clear | ne medical sto dures; and pla anliness and s in-service line | ck fund; mainning, pre-p sanitation aciens including | nagement and conto ositioning, and Sup @ S hievable. uniforms and |
| and non-medical supplies of medical organization in-managing the installation in Housekeeping & Linen The Housekeeping & Linen Housekeeping, also, is respecial linens. Preventive Care Health Promotion / Disease Prevention (Preventive Care) The oversight of all preventatiff. These departments Public Health Nursing Public Health Nutrition | and equipme- use property medical war I e provides re sponsible for ntive care and provide lead | ent required in support of through authorization, readiness materiel programmer of FTE sponsibility for maintain picking up, sorting, issued the authorization programmer of the alth education programmer of the fTE # of FTE | of the medic property ac tram. 3.1 ning the inte uing, distribution trams within the facility in the | al mission; incounting, rep 2.1 rior of a facility mending the facility. | stallation manage orting and budge ty at the highest g, washing, and Education efforts increase the hea | level of clear | ne medical sto dures; and pla anliness and s in-service line | ck fund; mainning, pre-p sanitation aciens including | nagement and concositioning, and Sup @ S hievable. uniforms and |
| and non-medical supplies of medical organization in-managing the installation in Housekeeping & Linen The Housekeeping & Linen Housekeeping Service Housekeeping, also, is respecial linens. Preventive Care Health Promotion / Disease Prevention (Preventive Care) The oversight of all preventaff. These departments Public Health Nursing Public Health Nutrition Environmental Health | and equipme- use property medical war I e provides re sponsible for ntive care and provide lead | ent required in support of through authorization, readiness materiel programmed in FTE sponsibility for maintain picking up, sorting, issued the health education programmed in the fTE with the following the fTE with the first picking up are soft the following up are soft for fTE with the first picking up and first picking up are soft for fTE with the first picking up and first picking up and first picking up are soft for fTE with the first picking up and first picking up are soft picking up are soft picking up and first picking up and first picking up are soft picking up and first picking up are soft picking up and first picking up and first picking up are soft picking up and first picking up and first picking up are soft picking up and first picking up and first picking up are soft picking up and first picking up are soft picking up | of the medic property ac rram. 3.1 ning the inte uing, distributed arrams within the facility in the 1.5 0.2 | the facility. It the facility is the facility. | stallation manage orting and budge ty at the highest g, washing, and Education efforts increase the hea | level of clear | ne medical sto dures; and pla anliness and s in-service line | ck fund; mainning, pre-p sanitation aciens including | nagement and conto ositioning, and Sup @ S hievable. uniforms and |
| and non-medical supplies of medical organization in- managing the installation in- Housekeeping & Linen The Housekeeping Service Housekeeping, also, is resisted in the service of the ser | and equipme- use property medical war I e provides re sponsible for ntive care and provide lead | ent required in support of through authorization, readiness materiel programmed in FTE sponsibility for maintain picking up, sorting, issued the alth education programmed in FTE # of FTE # of FTE # of FTE | of the medic property act ram. 3.1 ning the interior distribution of the control of the contro | al mission; incounting, rep 2.1 rior of a facility the facility. I heir efforts to 1 | stallation manage orting and budge ty at the highest g, washing, and Education efforts increase the hea | level of clear | ne medical sto dures; and pla anliness and s in-service line | ck fund; mainning, pre-p sanitation aciens including | nagement and conto ositioning, and Sup @ S hievable. uniforms and |
| and non-medical supplies of medical organization in-managing the installation in Housekeeping & Linen The Housekeeping & Linen Housekeeping Service Housekeeping, also, is respecial linens. Preventive Care Health Promotion / Disease Prevention (Preventive Care) The oversight of all preventation of the Environmental Health Nutrition Public Health Nutrition Environmental Health Health Education Additional Services | and equipme- use property medical war I e provides re sponsible for ntive care and provide lead | ent required in support of through authorization, readiness materiel programmed in FTE sponsibility for maintain picking up, sorting, issued the alth education programmed in FTE # of FTE # of FTE # of FTE | of the medic property act ram. 3.1 ning the interior distribution of the control of the contro | al mission; incounting, rep 2.1 rior of a facility the facility. I heir efforts to 1 | stallation manage orting and budge ty at the highest g, washing, and Education efforts increase the hea | level of clear | ne medical sto dures; and pla anliness and s in-service line | ck fund; mainning, pre-p sanitation aciens including | nagement and contositioning, and Sup @ S hievable. uniforms and |
| and non-medical supplies of medical organization in-managing the installation in Housekeeping & Linen The Housekeeping Service Housekeeping, also, is respecial linens. Preventive Care Health Promotion / Disease Prevention (Preventive Care) The oversight of all preventatiff. These departments Public Health Nursing | and equipme-use property medical war i e provides re sponsible for ntive care and provide leade | ent required in support of through authorization, readiness materiel programmed in FTE sponsibility for maintain picking up, sorting, issued the health education programmed in FTE # of FTE | of the medic property act ram. 3.1 ning the interior distribution of the | the facility. It heir efforts to 0 | stallation manager orting and budger ty at the highest g, washing, and Education efforts increase the hea | level of clear processing | ne medical sto dures; and pla anliness and s in-service line the public as ess of the pul | ck fund; mainning, pre-p sanitation aciens including | nagement and conto ositioning, and Sup @ S hievable. uniforms and |
| and non-medical supplies of medical organization in- managing the installation in- Housekeeping & Linen The Housekeeping Servic Housekeeping, also, is res special linens. Preventive Care Health Promotion / Disease Prevention (Preventive Care) The oversight of all prever staff. These departments Public Health Nursing Public Health Nutrition Environmental Health Health Education Additional Services Hostel Services | and equipme-use property medical war i e provides re sponsible for ntive care and provide leade | ent required in support of through authorization, readiness materiel programmed in FTE sponsibility for maintain picking up, sorting, issued the health education programmed in FTE # of FTE | of the medic property act ram. 3.1 ning the interior distribution of the | the facility. It heir efforts to 0 | stallation manager orting and budger ty at the highest g, washing, and Education efforts increase the hea | level of clear processing | ne medical sto dures; and pla anliness and s in-service line the public as ess of the pul | ck fund; mainning, pre-p sanitation aciens including | nagement and conto ositioning, and Sup @ S hievable. uniforms and |
| and non-medical supplies of medical organization in- managing the installation in- Housekeeping & Linen The Housekeeping Service Housekeeping, also, is resisted linens. Preventive Care Health Promotion / Disease Prevention (Preventive Care) The oversight of all prevenstaff. These departments Public Health Nursing Public Health Nutrition Environmental Health Health Education Additional Services Hostel Services The provision of temporary | and equipme-use property medical war i e provides re sponsible for ntive care and provide lead | ent required in support of through authorization, readiness materiel programmed in FTE sponsibility for maintain picking up, sorting, issued the alth education programming to all areas of the # of FTE | of the medic property activates a series within the facility in the facility in the series of the se | al mission; ir. counting, rep 2.1 rior of a facilititing, mending the facility. heir efforts to 1 0 0 | stallation manager orting and budger ty at the highest g, washing, and washing, and one one one one one one one one one one | level of clear processing will involve alth awaren | ne medical sto dures; and pla anliness and s in-service line the public as ess of the pul | ck fund; mainning, pre-p | nagement and contositioning, and Sup @ S hievable. uniforms and entire health syster Sup @ S |
| and non-medical supplies of medical organization in- managing the installation in- managing the installation in- Housekeeping & Linen The Housekeeping Service Housekeeping, also, is resispecial linens. Preventive Care Health Promotion / Disease Prevention (Preventive Care) The oversight of all preverstaff. These departments Public Health Nursing Public Health Nutrition Environmental Health Health Education Additional Services Hostel Services The provision of temporary Case Management | and equipme-use property medical war i e provides re sponsible for ntive care and provide lead | ent required in support of through authorization, readiness materiel programmed in FTE sponsibility for maintain picking up, sorting, issued the alth education programming to all areas of the # of FTE | of the medic property activates a series within the facility in the facility in the series of the se | al mission; ir. counting, rep 2.1 rior of a facilititing, mending the facility. heir efforts to 1 0 0 | stallation manager orting and budger ty at the highest g, washing, and washing, and one one one one one one one one one one | level of clear processing will involve alth awaren | ne medical sto dures; and pla anliness and s in-service line the public as ess of the pul | ck fund; mainning, pre-p | nagement and contositioning, and Sup @ S hievable. uniforms and entire health system Sup @ S |



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

| Discipline Planned Direct Care (KC) Diabetes Program # of FTE The Diabetes Program provides for the diabetic patient's education and several provides an open and supportive environment as we deducation and health benefit counseling is provided by the state and provided and pending and pen | | | | Deliv | ery Option | s | |
|--|----------------|------------------|---------------------|----------------|------------------|--------------------|----------------------|
| Diabetes Program provides for the diabetic patient's educi- linical screening. The program is supported clinically with pro- Elder Care - Outreach # of FTE Elder Care provides an open and supportive environment as we ducation and health benefit counseling is provided by the state and the state of FTE # of Ambulances Loc #2 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #4 - # of FTE # of FT | # Req'd | | PSA | | Referra | ls due to shold | |
| The Diabetes Program provides for the diabetic patient's educionical screening. The program is supported clinically with proceeding. The program is supported clinically with proceeding is provided and provides an open and supportive environment as we aducation and health benefit counseling is provided by the state setup. The program is supported by the state setup. The provides and provided by the state setup. The provides are provided by the state setup. The setup by the setup. The setup by the setup. The setup by the set | in 2015 | On Site | On Site VP | CHS* | Srv Unit | Region | Remarks |
| The Diabetes Program provides for the diabetic patient's educilinical screening. The program is supported clinically with proceeding screening. The provides an open and supportive environment as well-ducation and health benefit counseling is provided by the statistics. The screening is provided by the screening is provided by the statistics. The screening is provided by the statistics is provided by the statistics. The screening is provided by the statistics and is provided by the statistics. The screening is provided by the statistics and screening is provided by the statistics. The screening is provided by the statistics and screening is provided by the statistics. The screening is provided by the statistics and screening is provided by the statistics. The screening is provided by the statistics and screening is provided by the statistics. The screening is provided by the statistics and screening is provided by the statistics. The screening is provided by the statistic by the statistics. The screening is provided by the statistic by the statistic by the statistic by the statistic by the screening is provided by the statistic by the statistic by the screening is provided by the statistic by the statistic by the screening is provided by the statistic by the screening is provided by the statistic by the screening is provided by the statistic | 0.0 | 1.0 | | | | | |
| Elder Care - Outreach # of FTE ider Care provides an open and supportive environment as we ducation and health benefit counseling is provided by the state and counsel | | | nent and the pro | spective dia | abetic patient | with preventi | ve education and |
| Ider Care provides an open and supportive environment as we ducation and health benefit counseling is provided by the state ducation and health benefit counseling is provided by the state IMS 153 Loc #1 - # of FTE # of Ambulances Loc #2 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #2 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #2 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #4 - # of FTE # of Ambulances Loc #2 - # of FTE # of Ambulances Loc #2 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE * of | e-renal exa | miniations an | d Podiatry care. | | | | |
| Autreach Diabetes # of FTE with Administration Department oversees and ensures ersonal Care Attendants work with elderly and/or disabled Networks (Activities for Daily Living). Wellness Center provides fitness equipment, training, coaching upport or cooperation with such other programs such as WIC, PHN, MIAMI etc. ASFAE (AM) Project # of FTE # of FTE # of Ambulances for FTE # of FTE | 0.0 | 2.0 | | | | | |
| # of Ambulances Loc #2 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Geven days a week, staffed with State Certified EMT, IEMT and recurity # of FTE # of FTE # of Ambulances Gecurity # of FTE # of Ambulances # of FTE # of FTE # of FTE # of FTE # of Ambulances # of FTE # of FTE # of Ambulances # of FTE # of FTE # of Ambulances # of FTE # of FTE # of Ambulances # of FTE # of FTE # of Ambulances # of FTE # of F | | utreach progr | am for the comn | nunity's elde | ers. Lunch dis | tribution, soc | ial functions, hea |
| # of Ambulances Loc #2 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Loc #3 - # of FTE # of Ambulances Interpretation # of FTE # of Ambulances # of FTE # of FTE # of Ambulances # of FTE # of Ambulances # of FTE # of Ambulances # of FTE # of FTE # of Ambulances # of FTE | 0.0 | 9.0 | | 153 | | | |
| # of Ambulances Loc #3 - # of FTE # of Ambulances were days a week, staffed with State Certified EMT, IEMT and Security # of FTE were days a week, staffed with State Certified EMT, IEMT and Security is responsible for the safety and well being of hospital rounds, and interiors of the facility. Transportation # of FTE Transportation Department transports community residents to incurred for automotive operation and maintenance and the additional Health Administration Department oversees and ensures resonal control over their health and quality of life. WIC Program provides nutrition screening, nutrition education, ostpartum women, infants and children <5 years of age who in the support of the supp | 0.0 | 1.0 | | 100 | | | |
| # of Ambulances # of FTE # of Ambulances # of FTE | 0.0 | 0.0 | | | | | |
| # of Ambulances imergency Medical Services provide emergency medical services and ays a week, staffed with State Certified EMT, IEMT and security # of FTE idecurity # of FTE idecurity is responsible for the safety and well being of hospital rounds, and interiors of the facility. Fransportation # of FTE Fransportation Department transports community residents to incurred for automotive operation and maintenance and the additional forms of their health Administration # of FTE Fribal Health Administration # of FTE Fribal Health Administration Department oversees and ensures are sonal control over their health and quality of life. WIC # of FTE Fribal Health Administration Screening, nutrition education, ostpartum women, infants and children <5 years of age who in the properties of the properties | 0.0 | 0.0 | | | | | |
| reven days a week, staffed with State Certified EMT, IEMT and security # of FTE recurity is responsible for the safety and well being of hospital rounds, and interiors of the facility. Fransportation # of FTE ransportation Department transports community residents to recurred for automotive operation and maintenance and the additional Health Administration # of FTE ransportation deveration Department oversees and ensured resonal control over their health and quality of life. WIC # of FTE resonal control over their health and quality of life. WIC Program provides nutrition screening, nutrition education, ostpartum women, infants and children <5 years of age who reconstructed by the provides for proper exercise and nutriansportation support, community/school screenings, exercise reconsul Care Attendants # of FTE resonal Care Attendants # of FTE resonal Care Attendants # of FTE resonal Care Attendants work with elderly and/or disabled National Planning/Domestic Violence promotes Native Americand Attendants with such other programs as Elder Care and the provision of shelters/safe hour the programs such as WIC, PHN, MIAMI etc. ASIFAE # of FTE elder Alcohol Education (FAE, ersonal support to pregnant women at risk. Developmental a community/individual education, and supportive prevention act AllAMI Project # of FTE eld | 0.0 | 0.0 | | | | | |
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| Transportation Department transports community residents to accurred for automotive operation and maintenance and the accurred for automotive operation over their health and quality of life. WIC Program provides nutrition screening, nutrition education, ostpartum women, infants and children <5 years of age who report the properties of a general provides for the properties of the prope | 0.0 | 2.0 | | | | | |
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| Veliness Center provides fitness equipment, training, coaching upport or cooperation with such other programs as Elder Card Family Planning/Domestic Violenc # of FTE amily Planning/Domestic Violence promotes Native American education, appointment referrals for sterilization procedures, as of domestic violence through the provision of shelters/safe housther programs such as WIC, PHN, MIAMI etc. FAS/FAE # of FTE # | 0.0 | | | | | | |
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| Family Planning/Domestic Violenc # of FTE amily Planning/Domestic Violence promotes Native American ducation, appointment referrals for sterilization procedures, a f domestic violence through the provision of shelters/safe houther programs such as WIC, PHN, MIAMI etc. FAS/FAE # of FTE at all Alcohol Syndrome (FAS) / Fetal Alcohol Education (FAE) are as a support to pregnant women at risk. Developmental a community/individual education, and supportive prevention act MIAMI Project # of FTE all Almid Project # of FTE and affining "high risk" (age, previous birth weight, health the naintaining personal health habits that may lead to the birth of Cardiac Rehab # of FTE ardiac Rehab promotes improved health among post-cardiac xercise rehabiliation. Assessment by treadmill testing is follows. | - | | re Americans or | ali ayes, at | ung euner as | an muepenu | ent service or in |
| amily Planning/Domestic Violence promotes Native Americar ducation, appointment referrals for sterilization procedures, as of domestic violence through the provision of shelters/safe houther programs such as WIC, PHN, MIAMI etc. FAS/FAE # of FTE fetal Alcohol Syndrome (FAS) / Fetal Alcohol Education (FAE, ersonal support to pregnant women at risk. Developmental a community/individual education, and supportive prevention act MIAMI Project # of FTE MIAMI Project is a state funded program that works with "libph riteria defining "high risk" (age, previous birth weight, health in naintaining personal health habits that may lead to the birth of Cardiac Rehab # of FTE Cardiac Rehab promotes improved health among post-cardiac xercise rehabiliation. Assessment by treadmill testing is follows. | 0.0 | 1.0 | | | | | |
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| ersonal support to pregnant women at risk. Developmental a community/individual education, and supportive prevention act AIAMI Project # of FTE AIAMI Project # of FTE AIAMI Project is a state funded program that works with "high riteria defining "high risk" (age, previous birth weight, health haintaining personal health habits that may lead to the birth of Cardiac Rehab # of FTE Cardiac Rehab promotes improved health among post-cardiac xercise rehabiliation. Assessment by treadmill testing is followed. | 0.0 | 0.2 | | - | | | |
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| MIAMI Project is a state funded program that works with "high criteria defining "high risk" (age, previous birth weight, health h naintaining personal health habits that may lead to the birth of Cardiac Rehab # of FTE Cardiac Rehab promotes improved health among post-cardiac exercise rehabiliation. Assessment by treadmill testing is follo | | 0.2 | | | | | |
| riteria defining "high risk" (age, previous birth weight, health h naintaining personal health habits that may lead to the birth of Cardiac Rehab # of FTE Cardiac Rehab promotes improved health among post-cardiac exercise rehabiliation. Assessment by treadmill testing is follo | 0.0 | 0.2 | often referred th | rough outre | ach activities | or a PHN I | Itilizina standardi: |
| Cardiac Rehab # of FTE Cardiac Rehab promotes improved health among post-cardiac exercise rehabiliation. Assessment by treadmill testing is follor | nistory etc.), | , patients are | | | | | |
| xercise rehabiliation. Assessment by treadmill testing is follow | 0.0 | 0.0 | | | | | |
| | • | • | | • | • | | , - |
| | - | | | - | | | The patient is |
| encouraged toward lifelong exercise enthusiasm by seeing imm | mediate an | a long term b | enefits of exercis | se througho | ut the rehab p | rocess. | |
| | | | | | | | |

Resource Allocation Plan



Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

| | | Direct He | alth Care | | | Contr | act Healt | n Care |
|--------------------|-----------------------------------|--|--------------------|------------------------------|-----------|-----------------------------------|----------------|---------------------|
| Discipline | Planned Projected Provider Visits | Key Characteristics (KC) | # Req'd in 2015 | Exist KC (From Quest.) | % of Need | Planned Projected Provider Visits | Cost / Unit | Total CH Dollars |
| Primary Care | Only | | | | | Only | | |
| Family Practice | 5,224 | Providers | 1.2 | 1.2 | 100% | 0 | \$58 | \$0 |
| | Visiting Provid | lers to outlying areas. | | | 4=00/ | | | |
| | | Provider Offices | 2.0 | 3.0 | 150% | | | |
| Internal Medicine | 0 | Exam Rooms Providers | 4.0 0.0 | 3.0 0.1 | 75% | 0 | \$58 | \$0 |
| internal Medicine | | lers to outlying areas. | 0.0 | 0.1 | 100% | U | ბებ | φυ |
| | Visiting Flovic | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Pediatric | 0 | Providers | 0.0 | 0.05 | 100% | 0 | \$54 | \$0 |
| Calatrio | | lers to outlying areas. | 0.0 | 0.00 | 10070 | Ū | ΨΟ-Τ | ΨΟ |
| | violang i rovio | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Ob/Gyn | 0 | Providers | 0.0 | | 100% | 0 | \$261 | \$0 |
| 05/01/1 | ~ | lers to outlying areas. | 0.0 | | 10070 | | Ψ201 | ΨΨ |
| | | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Primary Care Total | 5,224 | Providers | 1.2 | 1.4 | 113% | 0 | | \$0 |
| | -, | Provider Offices | 2.0 | 3.0 | 150% | | | • |
| | Nursing Sur | port (RN+LPN+CNA) | | 2.0 | 111% | | | |
| | | Exam Rooms | 4.0 | 3.0 | 75% | | | |
| | | Dept. Gross Sq. Mtrs | | 256.0 | 88% | | | |
| | | | | | | | | |
| Emergency Care | 0 | ER Providers | 0.0 | | 100% | 0 | \$247 | \$0 |
| Ŭ, | Nursir | ng Support (RN+LPN) | 0.0 | | 100% | | | |
| | | Patient Spaces | 0.0 | 1.0 | 100% | | | |
| | | Dept. Gross Sq. Mtrs | 0.0 | 28.0 | 100% | | | |
| 0 | Provider Visits | · | | | | Provider Visits | | |
| Specialty Care | Only | D '1 | 0.0 | | 1000/ | Only | **** | Φ0 |
| Orthopedics | 0 | Providers | 0.0 | | 100% | 0 | \$226 | \$0 |
| | Visiting Provid | lers to outlying areas. | 0.0 | | 4000/ | | | |
| | | Provider Offices | 0.0 | | 100% | | | |
| O l- th l l : | | Exam Rooms | 0.0 | | 100% | _ | # 000 | Φ0 |
| Ophthalmology | 0 | Providers | 0.0 | | 100% | 0 | \$292 | \$0 |
| | Visiting Provid | lers to outlying areas. | 0.0 | | 4000/ | | | |
| | | Provider Offices | | | 100% | | | |
| Dames atala mi | 0 | Exam Rooms | 0.0 | | 100% | 0 | 640 5 | ΦΛ |
| Dermatology | | Providers | 0.0 | | 100% | 0 | \$135 | \$0 |
| | visiting Provid | lers to outlying areas. Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | | | | | | |
| Conoral Surgary | 0 | Providers | 0.0 | | 100% | 0 | \$187 | \$0 |
| General Surgery | 0 Visiting Provis | | 0.0 | | 100% | 0 | φισ/ | ΦU |
| | visiting Provid | lers to outlying areas. | 0.0 | | 4000/ | | | |
| | | Provider Offices | 0.0 | | 100% | | | |
| Otolon/ngology | 0 | Exam Rooms Providers | 0.0 | 0.1 | 100% | 0 | 6404 | \$0 |
| Otolaryngology | | Providers lers to outlying areas. | 0.0 | 0.1 | 100% | U | \$191 | ΦU |
| | visiting Provid | Provider Offices | 0.0 | | 1000/ | | | |
| | | | 0.0 | | 100% | | | |
| Cardiology | 0 | Exam Rooms Providers | 0.0 | | 100% | 0 | \$231 | \$0 |
| Cardiology | | | 0.0 | | 100% | 0 | Φ ∠3 I | ΦU |
| | visiting Provid | lers to outlying areas. Provider Offices | 0.0 | | 4000/ | | | |
| | | | 0.0 | | 100% | | | |
| Urology | 0 | Exam Rooms Providers | 0.0 | | 100% | 0 | 6407 | \$0 |
| Urology | | | 0.0 | | 100% | 0 | \$187 | ΦU |
| | visiting Provid | lers to outlying areas. | 0.0 | | 4000/ | | | |
| | | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |

Resource Allocation Plan



Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

| | | Direct Hea | alth Care | | | Contr | act Healt | h Care |
|---|-----------------|-------------------------|------------|-------------------|-----------|-----------|------------|------------|
| | | Direct He | miii oui o | Evict VC | | - John | ast Ficult | . July |
| | Planned | Key Characteristics | # Req'd in | Exist KC (From | | Planned | Cost / | Total CH |
| Discipline | Projected | (KC) | 2015 | Quest.) | % of Need | Projected | Unit | Dollars |
| Neurology | 0 | Providers | 0.0 | Q | 100% | 0 | \$198 | \$0 |
| ricarciegy | • | lers to outlying areas. | 0.0 | | 10070 | · · | φίσσ | ΨΟ |
| | rioining rioini | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Other and Orabe and a shallfing | | | 3.0 | | 10070 | 0 | 0.574 | # 0 |
| Other Subspecialties | | | | | | 0 | \$571 | \$0 |
| Nephrology | | Providers | 0.0 | | 100% | | | |
| | Visiting Provid | lers to outlying areas. | | | | | | |
| | | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Allergy | | Providers | 0.0 | | 100% | | | |
| | Visiting Provid | lers to outlying areas. | | | | | | |
| | | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Pulmonology | | Providers | 0.0 | | 100% | | | |
| | Visiting Provid | lers to outlying areas. | | | | | | |
| | | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Gerontology | | Providers | 0.0 | | 100% | | | |
| | Visiting Provid | lers to outlying areas. | | | | | | |
| | | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Gastroenterology | | Providers | 0.0 | | 100% | | | |
| | Visiting Provid | lers to outlying areas. | | | | | | |
| | | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Rheumatology | | Providers | 0.0 | | 100% | | | |
| | Visiting Provid | lers to outlying areas. | | | | | | |
| | • | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Oncology | | Providers | 0.0 | | 100% | | | |
| | Visiting Provid | lers to outlying areas. | | | | | | |
| | - | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Pediatric-Genetics | | Providers | 0.0 | | 100% | | | |
| | Visiting Provid | lers to outlying areas. | | | | | | |
| | · · | Provider Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Traditional Healing | | Providers | 1.0 | | 0% | | | |
| 3 | | Provider Offices | 1.0 | | 0% | | | |
| | | Exam Rooms | 1.0 | | 0% | | | |
| Podiatry Visits | 0 | Podiatrists | 0.0 | 0.1 | 100% | 0 | \$0 | \$0 |
| , | Visiting Provid | lers to outlying areas. | | | | | | |
| | | Podiatry Offices | 0.0 | | 100% | | | |
| | | Exam Rooms | 0.0 | | 100% | | | |
| Specialty Care Sub-Total | 0 | Exam Rooms | 1.0 | 0.0 | 0% | 0 | | \$0 |
| , | | Provider Offices | 1.0 | 0.0 | 0% | | | |
| | | Dept. Gross Sq. Mtrs | | | 0% | | | |
| Total In Hausa Dravidara | 5,224 | Providers | 2.2 | 16 | 70% | | | |
| Total In-House Providers | 5,224 | FIUVIUEIS | 2.2 | 1.6 | 70% | | | |
| Visiting Professional Clinic | 1,525 | Exam | 1.0 | | 0% | | | |
| 5 | | Provider Offices | 1.0 | | 0% | | | |
| | | Dept. Gross Sq. Mtrs | 73.0 | | 0% | | | |
| | - | ,, | | | | | | |

Resource Allocation Plan



Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

| | | Direct He | alth Care | | | Conti | act Health | Care |
|--|----------------------|--|--|------------------------------|--|----------------------|----------------------------------|--------------------------|
| Discipline | Planned Projected | Key Characteristics (KC) | # Req'd in 2015 | Exist KC (From Quest.) | % of Need | Planned Projected | Cost / Unit | Total CH Dollars |
| Other Ambulatory Care | | | | | | | | |
| Services | 110.770 | D (1) | 4.4 | 4.0 | 0.40/ | • | 0.0 | 00 |
| Dental Service Minutes | 110,770 | Dentists | 1.1 | 1.0 | 91% | 0 | \$0 | \$0 |
| | visiting Provid | ders to outlying areas. | 0.0 | | 00/ | | | |
| | | Hygenists | 0.6 | 0.0 | 0% | | | |
| | | Dental Chair | 3.0 | 3.0 | 100% | | | |
| Out on the Niette | | Dept. Gross Sq. Mtrs | | 127.0 | 103% | 0 | Φ0 | Φ0 |
| Optometry Visits | 0 | Optometrist | 0.0 | 0.6 | 100% | 0 | \$0 | \$0 |
| | Visiting Provid | ders to outlying areas. | 0.0 | 4.0 | 4000/ | | | |
| | | Provider Offices | 0.0 | 1.0 | 100% | | | |
| | | Eye Lanes | 0.0 | 1.0 | 100% | | | |
| | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | • |
| Dialysis Patients | 0 | Dialysis Stations | 0.0 | | 100% | 0 | \$856 | \$0 |
| | _ | Dept. Gross Sq. Mtrs | | | 100% | | | |
| Audiology Visits | 0 | Audiologists | 0.0 | 0.05 | 100% | 0 | \$304 | \$0 |
| | Visiting Provid | ders to outlying areas. | | | | | | |
| | | Audiologist Offices | 0.0 | | 100% | | | |
| | | Audiology Booths | 0.0 | 1.0 | 100% | | | |
| | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| Behavioral Health | | | | | | | | |
| Mental Health Visits | | Counselors | 0.9 | 0.2 | 23% | | | |
| Psychiatry | | Counselors | 0.0 | <u> </u> | 100% | | | |
| Social Service Visits | _ | Counselors | 0.0 | | 100% | | | |
| Alcohol & Substance Abuse | _ | Counselors | 1.0 | 0.2 | 20% | | | |
| Behavioral Health Total | | Total Counselors | 1.9 | 0.4 | 21% | 0 | \$0 | \$0 |
| Beriavioral Fleatiff Fotal | Visiting Provid | ders to outlying areas. | 1.0 | 0.1 | 2170 | | ΨΟ | ΨΟ |
| | Violarig i Tovic | Counselor Offices | 2.0 | | 0% | | | |
| | | Dept. Gross Sq. Mtrs | | | 0% | | | |
| In a stir at Orac | | Bopt. Grood eq. mac | 02.0 | | 3 / 0 | | | 0 (0) |
| Inpatient Care Births | 0 | LDRPs | 0.0 | | 100% | 0 | \$2,859 | \$ are at St |
| Dirtiis | U | Dept. Gross Sq. Mtrs | | | 100% | U | φ2,009 | ΨΟ |
| Obstetric Patient Days | 0 | Post Partum beds | 0.0 | | 100% | 0 | | |
| Obstetric Fatient Days | U | | | | | U | | |
| Noonatalagy Dationt Days | | Dept. Gross Sq. Mtrs | | | 100% | 0 | ቀ4 ኃ ሰኃ | ΦO |
| Neonatology Patient Days | 0 | # of Bassinets | 0.0 | | 100% | 0 | \$1,203 | \$0 |
| Dadietria Datient Davis | | Dant Cases Ca Miss | 0.0 | | 4000/ | | | |
| Pediatric Patient Days | | Dept. Gross Sq. Mtrs | | | 100% | 0 | #4 000 | ФО. |
| | 0 | # of Beds | 0.0 | | 100% | 0 | \$1,203 | \$0 |
| | _ | # of Beds Dept. Gross Sq. Mtrs | 0.0 0.0 | | 100% 100% | | | |
| Adult Medical Acute Care | 0 | # of Beds Dept. Gross Sq. Mtrs # of Beds | 0.0 0.0 0.0 | | 100% 100% 100% | 0 | \$1,203 \$827 | \$0 \$0 |
| Adult Medical Acute Care | 0 | # of Beds Dept. Gross Sq. Mtrs # of Beds Dept. Gross Sq. Mtrs | 0.0 0.0 0.0 0.0 | | 100% 100% 100% 100% | 0 | \$827 | \$0 |
| Adult Medical Acute Care | _ | # of Beds Dept. Gross Sq. Mtrs # of Beds Dept. Gross Sq. Mtrs # of Beds | 0.0 0.0 0.0 0.0 0.0 | | 100% 100% 100% 100% 100% | | | |
| Adult Medical Acute Care Adult Surgical Acute Care | 0 | # of Beds Dept. Gross Sq. Mtrs | 0.0 0.0 0.0 0.0 0.0 0.0 | | 100% 100% 100% 100% 100% 100% | 0 | \$827 \$827 | \$0 \$0 |
| Adult Medical Acute Care Adult Surgical Acute Care | 0 | # of Beds Dept. Gross Sq. Mtrs # of Beds | 0.0 0.0 0.0 0.0 0.0 0.0 0.0 | | 100% 100% 100% 100% 100% 100% | 0 | \$827 | \$0 |
| Adult Medical Acute Care Adult Surgical Acute Care Intensive Care Patient Days | 0 0 | # of Beds Dept. Gross Sq. Mtrs | 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 | | 100% 100% 100% 100% 100% 100% 100% | 0 0 | \$827 \$827 \$827 | \$0 \$0 \$0 |
| Adult Medical Acute Care Adult Surgical Acute Care Intensive Care Patient Days | 0 | # of Beds Dept. Gross Sq. Mtrs # of Beds | 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 | | 100% 100% 100% 100% 100% 100% 100% 100% | 0 | \$827 \$827 | \$0 \$0 |
| Adult Medical Acute Care Adult Surgical Acute Care Intensive Care Patient Days Psychiatric Patient Days | 0 0 0 | # of Beds Dept. Gross Sq. Mtrs | 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 | | 100% 100% 100% 100% 100% 100% 100% 100% | 0 0 0 | \$827 \$827 \$827 \$335 | \$0 \$0 \$0 \$0 |
| Adult Medical Acute Care Adult Surgical Acute Care Intensive Care Patient Days Psychiatric Patient Days | 0 0 | # of Beds Dept. Gross Sq. Mtrs # of Beds | 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 | | 100% 100% 100% 100% 100% 100% 100% 100% | 0 0 | \$827 \$827 \$827 | \$0 \$0 \$0 |
| Adult Medical Acute Care Adult Surgical Acute Care Intensive Care Patient Days Psychiatric Patient Days Medical Detox Patient Days | 0 0 0 0 | # of Beds Dept. Gross Sq. Mtrs | 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 | | 100% 100% 100% 100% 100% 100% 100% 100% | 0 0 0 | \$827 \$827 \$827 \$335 | \$0 \$0 \$0 \$0 |
| Adult Medical Acute Care Adult Surgical Acute Care | 0 0 0 | # of Beds Dept. Gross Sq. Mtrs # of Beds | 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 | | 100% 100% 100% 100% 100% 100% 100% 100% | 0 0 0 | \$827 \$827 \$827 \$335 | \$0 \$0 \$0 \$0 |
| Adult Medical Acute Care Adult Surgical Acute Care Intensive Care Patient Days Psychiatric Patient Days Medical Detox Patient Days | 0 0 0 0 | # of Beds Dept. Gross Sq. Mtrs | 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 | | 100% 100% 100% 100% 100% 100% 100% 100% | 0 0 0 | \$827 \$827 \$827 \$335 | \$0 \$0 \$0 \$0 |
| Adult Medical Acute Care Adult Surgical Acute Care Intensive Care Patient Days Psychiatric Patient Days Medical Detox Patient Days | 0 0 0 0 | # of Beds Dept. Gross Sq. Mtrs # of Beds | 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 | 0 | 100% 100% 100% 100% 100% 100% 100% 100% | 0 0 0 | \$827 \$827 \$827 \$335 | \$0 \$0 \$0 \$0 |

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Resource Allocation Plan



Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

| | | Direct Hea | alth Care | | | Contr | act Healtl | n Care |
|-----------------------------|----------------------|-----------------------------|--------------------|------------------------------|-----------|----------------------|----------------|---------------------|
| Discipline | Planned Projected | Key Characteristics (KC) | # Req'd in 2015 | Exist KC (From Quest.) | % of Need | Planned Projected | Cost / Unit | Total CH Dollars |
| Ancillary Services | | | | | | | | |
| Laboratory Services | | | | | · | | | |
| Clinical Lab | 4,258 | Tech staff @ peak | 0.4 | 1.0 | 250% | | | |
| Microbiology Lab | 0 | Tech staff @ peak | 0.0 | | 100% | | | |
| Blood Bank | 0 | Tech staff @ peak | 0.0 | | 100% | | | |
| Anatomical Pathology | 0 | Tech staff @ peak | 0.0 | | 100% | | | |
| Lab Total | 4,258 | Tech staff @ peak | 0.4 | 1.0 | 250% | 0 | \$175 | \$0 |
| | | Dept. Gross Sq. Mtrs | 8.0 | 67.0 | 838% | | | |
| Pharmacy | 14,364 | Pharmacists | 0.6 | 1.0 | 167% | 0 | \$0 | \$0 |
| | | Dept. Gross Sq. Mtrs | 31.7 | 68.0 | 215% | | | |
| Acute Dialysis | 0 | Rooms | 0.0 | | 100% | | | |
| | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| Diagnostic Imaging | | | | | | | | |
| Radiographic exams | 419 | Rooms | 0.1 | | 0% | 0 | \$205 | \$0 |
| Ultrasound Exams | 0 | Rooms | 0.0 | | 100% | 0 | \$227 | \$0 |
| Mammography Exams | 0 | Rooms | 0.0 | | 100% | 0 | \$57 | \$0 |
| Fluoroscopy Exams | 0 | Rooms | 0.0 | | 100% | 0 | \$62 | \$0 |
| СТ | 0 | Rooms | 0.0 | | 100% | 0 | \$602 | \$0 |
| MRI exams | 0 | Rooms | 0.0 | | 100% | 0 | \$813 | \$0 |
| Diagnostic Imaging Total | 419 | Radiologists | 0.0 | | 100% | 0 | | \$0 |
| | | Dept. Gross Sq. Mtrs | 15.0 | | 0% | | | |
| Nuclear Medicine | 0 | Rooms | 0.0 | | 100% | 0 | \$511 | \$0 |
| | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| Radiation Oncology | 0 | Rooms | 0.0 | | 100% | | | |
| | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| Chemotherapy | 0 | Patient Spaces | 0.0 | | 100% | 0 | \$779 | \$0 |
| | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| Rehabilitation Services | | | | | | | | |
| PT Visits | | Therapy FTE | 0.0 | | 100% | | | |
| OT Visits | | Therapy FTE | 0.0 | | 100% | | | |
| Speech Therapy Visits | | Therapy FTE | 0.0 | | 100% | | | |
| Rehab Total | 0 | Therapy FTE | 0.0 | 0.0 | 100% | 0 | \$210 | \$0 |
| | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| RT Workload Minutes | 0 | Therapy FTE | 0.0 | | 100% | 0 | | \$0 |
| | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| Cardiac Catherization | 0 | Rooms | 0.0 | | 100% | 0 | \$2,503 | \$0 |
| | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| Surgery | | | | | | | | |
| Outpatient Endoscopy Cases | 0 | Endoscopy Suites | 0.0 | | 100% | 0 | \$1,220 | \$0 |
| Outpatient Surgery Cases | 0 | Outpatient ORs | 0.0 | | 100% | 0 | \$1,220 | \$0 |
| Inpatient Surgical Cases | 0 | Inpatient ORs | 0.0 | | 100% | 0 | | \$0 |
| | | # of Pre-Op Spaces | 0.0 | | 100% | | | |
| | | # of PACU Spaces | 0.0 | | 100% | | | |
| | | # of Phase II Spaces | 0.0 | | 100% | | | |
| Surgical Case Total | 0 | # of ORs | 0.0 | 0.0 | 100% | 0 | | \$0 |
| | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| Administrative Support | | | | | | | | |
| Administration | | # of FTE | 5.5 | 0.4 | 7% | | | |
| | | Dept. Gross Sq. Mtrs | 104.1 | 50.0 | 48% | | | |
| Information Management | | # of FTE | 0.0 | 30.0 | 100% | | | |
| morniation Management | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| Health Information Mngmt. | | # of FTE | 3.2 | 3.0 | 92% | | | |
| ricatur imormation wingint. | | Dept. Gross Sq. Mtrs | 25.0 | 45.0 | 180% | | | |
| Business Office | | # of FTE | 3.0 | ₹3.0 | 0% | | | |
| Dualiteaa Office | | Dept. Gross Sq. Mtrs | 45.2 | | 0% | | | |
| Contract Health | | # of FTE | 0.0 | | 100% | | | |
| Contract i Icalui | | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| | | Dept. Gross Sq. Mills | 0.0 | | 10070 | | | |

Resource Allocation Plan



Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

| | Direct Health Care | | | Contr | Contract Health Care | | |
|--|--|--------------------|------------------------------|-----------|----------------------|----------------|---------------------|
| Discipline | Planned Key Characteristics Projected (KC) | # Req'd in 2015 | Exist KC (From Quest.) | % of Need | Planned Projected | Cost / Unit | Total CH Dollars |
| Facility Support Services | | | | | | | |
| Clinical Engineering | # of FTE | 0.6 | | 0% | | | |
| | Dept. Gross Sq. Mtrs | | | 0% | | | |
| Facility Management | # of FTE | 1.1 | | 0% | | | |
| , | Dept. Gross Sq. Mtrs | 15.5 | | 0% | | | |
| Central Sterile | # of FTE | 0.7 | | 0% | | | |
| | Dept. Gross Sq. Mtrs | 29.8 | | 0% | | | |
| Dietary | # of FTE | 0.0 | | 100% | | | |
| | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| Property & Supply | # of FTE | 0.0 | 0.0 | 100% | | | |
| | Dept. Gross Sq. Mtrs | | 9.0 | 100% | | | |
| Housekeeping & Linen | # of FTE | 2.1 | 2.0 | 97% | | | |
| | Dept. Gross Sq. Mtrs | 6.8 | 4.0 | 59% | | | |
| Preventive Care | | | | | | | |
| Public Health Nursing | # of FTE | 0.5 | 0.4 | 74% | <u></u> | | |
| | Visiting Providers to outlying areas. | | | | | | |
| | Dept. Gross Sq. Mtrs | | | 0% | | | |
| Public Health Nutrition | # of FTE | 0.0 | 1.00 | 100% | | | |
| | Visiting Providers to outlying areas. | | | | | | |
| | Dept. Gross Sq. Mtrs | 0.0 | | 100% | | | |
| Environmental Health | # of FTE | 0.0 | 0.015 | 100% | | | |
| | Dept. Gross Sq. Mtrs | | | 100% | | | |
| Health Education | # of FTE | 0.0 | | 100% | | | |
| | Dept. Gross Sq. Mtrs | | | 100% | | | |
| Case Management | # of FTE | 0.0 | | 100% | | | |
| | Visiting Providers to outlying areas. | | | | | | |
| | Dept. Gross Sq. Mtrs | | | 100% | | | |
| CHR | # of FTE | 5.0 | 4.0 | 80% | | | |
| S | Dept. Gross Sq. Mtrs | 68.0 | 182.0 | 268% | | | |
| Diabetes Program | # of FTE | 1.0 | 0.05 | 5% | | | |
| | Dept. Gross Sq. Mtrs | | | 0% | | | |
| Wellness Center | # of FTE | 2.0 | | 0% | | | |
| AUG. | Bldg. Gross Sq. Mtrs | | | 0% | | | |
| WIC | # of FTE | 0.5 | | 0% | | | |
| | Dept. Gross Sq. Mtrs | 6.8 | | 0% | | | |
| Additional Services - IHS Su | | | | 1000/ | | | |
| Hostel Services | Rooms | 0.0 | | 100% | | | |
| ENAC. | Dept. Gross Sq. Mtrs | 0.0 | | 100% | 450 | Φ0 | # |
| EMS | # of FTE | 9.0 | | 0% | 153 | \$0 | \$0 |
| | # of Ambulances | 2.0 | | 0% | | | |
| Courity | Dept. Gross Sq. Mtrs | 120.6 | | 0% | | | |
| Security | # of FTE Dept. Gross Sq. Mtrs | 1.0 6.2 | | 0% 0% | | | |
| Transportation | # of FTE | 2.0 | | 0% | 0 | \$0 | \$0 |
| Transportation | Dept. Gross Sq. Mtrs | | | 0% | U | φυ | φυ |
| | | | | | | | |
| Total FTE Staff - IHS or IH | S 638 RRM Supported | 39.1 | 16.0 | 41% | | | |
| | re Meters | 1,913 | 987 | 52% | | | |
| Total Building Gross Squa | | | | | | | |
| Total Building Gross Squa Substance Abuse Non- Acute Care | | | | | | | |
| Substance Abuse Non- | 0 # of Reds | 0.0 | | 100% | | | |

Resource Allocation Plan



Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

| | Direct Health Care | | | | |
|------------------------------|----------------------|-----------------------------|--------------------|------------------------------|-----------|
| Discipline | Planned Projected | Key Characteristics (KC) | # Req'd in 2015 | Exist KC (From Quest.) | % of Need |
| Adolescent Residential | 0 | # of Beds | 0.0 | | 100% |
| Treatment | | Dept. Gross Sq. Mtrs | 0.0 | | 100% |
| Substance Abuse Transitional | 0 | # of Beds | 0.0 | | 100% |
| Care | | Dept. Gross Sq. Mtrs | 0.0 | | 100% |
| | | | | | |

| Contract Health Care | | | | |
|----------------------|--------|----------|--|--|
| Planned | Cost / | Total CH | | |
| Projected | Unit | Dollars | | |

| Total SANAC - Building Gross Square Meters | 0 | 0 | 100% |
|--|---|---|------|
| | | | |

Additional Services - Non-IHS Supported

| Elder Care | | | | | |
|---------------------|---|------------------------------|------|---|------|
| Nursing Home | 0 | # of patient beds | 0.0 | | 100% |
| | | Bldg. Gross Sq. Mtrs. | 0.0 | | 100% |
| Assisted Living | 0 | # of patient beds | 0.0 | | 100% |
| | | Bldg. Gross Sq. Mtrs. | 0.0 | | 100% |
| Hospice | 0 | # of patient beds | 0.0 | | 100% |
| | | Bldg. Gross Sq. Mtrs. | 0.0 | | 100% |
| Outreach Elder Care | | # of FTE | 2.0 | | 0% |
| | | Bldg. Gross Sq. Mtrs. | 27.2 | | 0% |
| Home Health Care | 0 | # of Home Health Care FTE | 0.0 | | 100% |
| | | Bldg. Gross Sq. Mtrs. | 0.0 | | 100% |
| Elder Care Total | 0 | # of patient beds | 0 | 0 | 100% |
| | | Bldg. Gross Sq. Mtrs. | 27 | 0 | 0% |
| | | | | | |

| 0 | \$3,425 | \$0 |
|---|---------|-----|
|---|---------|-----|

| Total Elder Care - Building Gros | s square meters | 34 | 0 | 0% |
|----------------------------------|-----------------------|-------|-----|------|
| Miscellaneous Services | | | | |
| Tribal Health Administration | # of FTE | 0.0 | | 100% |
| | Dept. Gross Sq. Mtrs | 0.0 | | 100% |
| Outreach Diabetes | # of FTE | 1.0 | 1.0 | 100% |
| | Bldg. Gross Sq. Mtrs. | 13.6 | | 0% |
| MIAMI | # of FTE | 0.2 | | 0% |
| | Bldg. Gross Sq. Mtrs. | 2.7 | | 0% |
| Personal Care Attendants | # of FTE | 10.0 | | 0% |
| | Bldg. Gross Sq. Mtrs. | 136.0 | | 0% |
| Family Planning/Domestic | # of FTE | 1.0 | | 0% |
| Violence | Bldg. Gross Sq. Mtrs. | 26.0 | | 0% |
| FAS/FAE | # of FTE | 0.2 | | 0% |
| | Bldg. Gross Sq. Mtrs. | 2.7 | | 0% |
| Cardiac Rehab | # of FTE | 0.0 | | 100% |
| | Bldg. Gross Sq. Mtrs. | 0.0 | | 100% |
| Other | # of FTE | | | 100% |
| | Bldg. Gross Sq. Mtrs. | | | 100% |
| Other | # of FTE | | | 100% |
| | Bldg. Gross Sq. Mtrs. | | | 100% |
| Miscellaneous Services Building | Gross Square Mtrs | 181 | 0 | 0% |

2,128

46%

| Contract Health Dollars Sub-Total | \$0 |
|---|-----|
| Other Expenditures - Contract Health | \$0 |
| Inflation Adjusted CHS \$ - Total | \$0 |

Grand Total - Total Building Gross Square Meters